



COMPENDIUM OF AEROMEDICAL EVACUATION TERMINOLOGY

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This is the initial publication of Air Force Directory (AFDIR) 41-317. This Directory provides a comprehensive listing of all terms associated with the aeromedical evacuation system. It is to be used as a reference guide when using Air Force Policy Directive (AFPD) 41-3, *Worldwide Aeromedical Evacuation*; Air Force Instruction (AFI) 41-301, *Worldwide Aeromedical Evacuation*; AFI 41-302, *Aeromedical Evacuation Operations and Management*; AFI 41-303, *Aeromedical Evacuation Dietetics Support*; AFI 41-305, *Administering Aeromedical Staging Facilities*; Air Force Joint Manual (AFJMAN) 41-306, *Physician's Roles and Responsibilities in Aeromedical Evacuation*; Air Force Handbook (AFH) 41-307, *Aeromedical Evacuation Nursing Considerations and Standards of Care*; AFH 41-308, *Aeromedical Evacuation Aircrew Training Standards*; AFH 41-309, *Aeromedical Evacuation Equipment Standards*; AFH 41-310, *Flight Instructor/Flight Examiner Upgrade Training*; AFH 41-311, *Aeromedical Evacuation Operations Officer Training Standards*; AFH 41-312, *Aeromedical Evacuation Contingency Operations Training (AECOT)*; AFH 41-316, *Aeromedical Evacuation In-Flight Kit--Packaging Guide*; and Air Force Joint Handbook (AFJH) 41-313, *Aeromedical Evacuation Documentation*. This publication also provides a listing of Abbreviations and Acronyms as they appear in this directory. Send comments and suggested improvements on AF Form 847, **Recommendation for Change of Publication**, through channels, to HQ AMC/SGX, 502 Scott Drive, Room 226, Scott AFB IL 62225-5319.

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EDGAR R. ANDERSON, Lt General, USAF, MC
Surgeon General



Section A--Terms

- A -

Abort--To terminate a mission for any reason other than enemy action. It may occur at any point after the beginning of the mission and prior to its completion. (Joint Pub 1-02)

Actual Time of Arrival (ATA)--That time at which an aircraft actually sets down onto the runway.

Actual Time of Departure (ATD)--That time at which an aircraft actually lifts off the runway.

Additional Crew Member (ACM)--An individual possessing valid aeronautical orders, is required to perform in-flight duties, and is assigned in addition to the normal aircrew complement required for a mission.

Administrative Control (ADCOM)--Direction or exercise of authority over subordinate or other organizations in respect to administration and support, including organization of Service forces, control of resources and equipment, personnel management, unit logistics, individual and unit training, readiness, mobilization, demobilization, discipline, and other matters not included in the operational missions of the subordinate or other organizations.. (Joint Pub 1-02)

Aerial Port Squadron (APS)--An Air Force Organization which operates and provides the functions assigned to aerial ports, including processing personnel and cargo, rigging for airdrop, packing parachutes, loading equipment, preparing air cargo and load plans, loading and securing aircraft, ejecting cargo for inflight delivery, and supervising units engaged in aircraft loading and unloading operations. (Joint Pub 1-02)

Aeromedical Evacuation (AE)--The movement of patients under medical supervision to and between medical treatment facilities by air transportation. (Joint Pub 1-02)

Aeromedical Evacuation Coordinating Officer--An officer of an originating, intransit, or destination medical facility who coordinates the AE activities of the facility. Usually the director of patient administration.

Aeromedical Evacuation Coordination Center (AECC)--A coordination center, within the Joint Air Operations Center, which monitors all activities related to aeromedical evacuation (AE) operations execution. It manages the medical aspects of AE mission and serves as the net control station for AE communications. It coordinates medical requirements with airlift capability, assigns medical missions to the appropriate AE elements, and monitors patient movement activities. (Joint Pub 1-02)

Aeromedical Evacuation Crew Member (AECM)--Qualified flight nurses, AE technicians, unqualified student trainees performing AE duties under the direct supervision of a qualified instructor or flight nurse, and flight surgeon crew augmentees added to increase crew capability.

Aeromedical Evacuation Flight Surgeon (AEFS)--Physicians qualified in aerospace medicine, assigned to augment the MASF and aeromedical evacuation crew to increase its clinical capability. They provide patient preparation and treatment in the MASF, inflight medical augmentation to the AECMs and CCATTs, aeromedical support to MASF staff and AECMs, and professional staff liaison to referring MTFs.

Aeromedical Evacuation Liaison Team (AELT)--An AELT consists of two Medical Service Corps (MSC) officers, three radio operators, and a flight nurse that are deployed to provide a direct communications link between the user service requesting AE and the AECC.

Aeromedical Evacuation Operations Officer (AEEO)--A Medical Service Corps officer, medical administration specialist or technician (AFSC 4A0XX) that is assigned to the AE system to perform duties outlined in AFI 41-301, *Worldwide Aeromedical Evacuation*, AFI 41-302, *Aeromedical Evacuation Operations and Management*, and AFH 41-311, *Aeromedical Evacuation Operations Officer (AEEO) Training Standards*.

Aeromedical Evacuation Operations Team (AEOT)--This element of the AE system works with the AECC to oversee AE mission requirements at tactical/strategic hub interface or at senior lodger stations with CONUS locations. The AEOT coordinates and manages patient, AE crew needs, and medical equipment, patient on/off loads, and related support requirements.

Aeromedical Evacuation Squadron (AES)--An operational medical organization concerned primarily with the management and control of patients being transported via an aeromedical evacuation system or system echelon.

Aeromedical Evacuation Technician (AET)--A medical service apprentice, craftsman, or superintendent (AFSC X4N0XX) who is qualified as outlined in MCI 10-202, Vol 9, *Aircrew Training*, to perform AECM duties.

Aeromedical Evacuation Unit (AEU)--An operational medical organization concerned primarily with the management and control of patients being transported via an aeromedical evacuation system or system echelon. (Joint Pub 1-02)

Aeromedical Readiness Missions (ARM)--Training missions using simulated patients to prepare AECMs for moving patients during wartime.

Aeromedical Staging Squadrons (ASTS)--A medical facility (normally 50 to 250 beds) located on or near an air base or airstrip to receive administratively support, process, transport (on the ground), feed, and provide health care for patients entering, in the midst of, or leaving an aeromedical evacuation system.

Aerospace Ground Equipment (AGE)--Ground support equipment used to perform maintenance on aircraft. May be powered or non-powered. Also includes tent heaters and power generating equipment.

Aircraft Commander (AC)--The aircrew member designated by competent authority as being in command of an aircraft and responsible for its safe operation and accomplishment of the assigned mission. (Joint Pub 1-02)

Airhead--A designated area in a hostile or threatened territory which, when seized and held, ensures the continuous air landing of troops and materiel and provides the maneuver space necessary for projected operations. Normally it is the area seized in the assault phase of an airborne operation. A designated location in an area of operations used as a base for supply and evacuation by air. (Joint Pub 1-02)

Air Force Component Commander (AFCC)--In a unified, subunified, or joint task force command, the Air Force commander who oversees all air operations.

Airlift Coordination Cell (ALCC)--A cell within the air operations center which plans, coordinates, manages, and executes theater airlift operations in the area of responsibility or joint operations area. Normally consists of an airlift plans branch, an airlift operations branch, and an airlift logistics branch. (Joint Pub 1-02)

Air Force Operations Resource Management System (AFORMS)--This automated system provides air crew managers at base level with a single source of information on the readiness and experience level of the air crew force.

Air Mobility Command (AMC)--The Air Force Component Command of the US Transportation Command. (Joint Pub 1-02)

Air Operations Center (AOC)--The principle air operations installation from which aircraft and air warning functions of combat air operations are directed, controlled, and executed. It is the senior agency of the Air Force Component Commander from which command and control of air operations are coordinated with other components and Services. (Joint Pub 1-02)

Air Reserve Components (ARC)--The Air National Guard and Air Force Reserve.

Air Reserve Technician (ART)--A civilian employee of the United States Air Force Reserve (USAFR) and Air National Guard (ANGUS) who provides permanent party support to a USAFR unit and occupies a USAFR unit manpower document military position in the unit comparable to his or her civilian position. (AFDD 100)

Air Staging Unit (ASU)--A unit situated at an airfield and concerned with reception, handling, servicing, and preparation for departure of aircraft and control of personnel and cargo. (Joint Pub 1-02)

Air Technician--Air technicians are full-time employees of the ANG.

Air Terminal Operations Center (ATOC)--Work control unit for the aerial port.

Air Transportable Clinic (ATC)--The ATC provides limited flight-line support and clinic service to an operational squadron.

Air Transportable Hospital (ATH)--An Air Transportable Hospital:

- Cares for patients.
- Can support personnel for 30 days without re-supply.

Ambulatory Patient--A patient not requiring a litter while in transit. (Joint Pub 1-02)

Area of Responsibility (AOR)--1. The geographical area associated with a combatant command within which a combatant commander has authority to plan and conduct operations. 2. In naval usage, a predefined area of enemy terrain for which supporting ships are responsible for covering by fire on known targets or targets of opportunity and by observation. (Joint Pub 1-02)

Armed Services Medical Regulating Office (ASMRO)--A joint activity reporting directly to the Commander in Chief, US Transportation Command, the Department of Defense single manager for the regulation of movement of Uniformed Services patients. The Armed Services Medical Regulating Office authorizes transfers to medical treatment facilities of the Military Departments or the Department of Veterans Affairs and coordinates inter-theater and inside continental United States patient movement requirements with the appropriate transportation component commands of US Transportation Command. (Joint Pub 1-02)

Army Corps--A tactical unit larger than a division and smaller than a field army. A corps usually consists of two or more divisions together with auxiliary arms and services. (Joint Pub 1-02)

Attendant--Any individual, other than a member of the AE medical crew, whom a competent medical authority authorizes to accompany and care for the patient when such attendance is considered essential to the patient's:

- Medical support.
- Mental well-being.
- Physical well-being

Augmented Crew--A medical crew that adds additional FNs and AETs in order to extend crew duty time, and flight surgeons and respiratory technicians to increase crew clinical capabilities.

Authenticate--A challenge given by voice or electrical means to attest to the authenticity of a message or transmission. (Joint Pub 1-02)

Authentication--1. A security measure designed to protect a communications system against acceptance of a fraudulent transmission or simulation by establishing the validity of a transmission, message, or originator. 2. A means of identifying individuals and verifying their eligibility to receive specific categories of information. 3. Evidence by proper signature or seal that a document is genuine and official. (Joint Pub 1-02)

Authenticator--A symbol or group of symbols, or a series of bits, selected or derived in a prearranged manner and usually inserted at a predetermined point within a message or transmission for the purpose of attesting to the validity of the message or transmission. (Joint Pub 1-02)

Automated Patient Evacuation System (APES)--A microprocessor-based, flight management system that:

- Provides automated information support for HQ AMC/SG and the active duty aeromedical evacuation squadrons
- Supports the ASTSs, detachments, and strategic reserve units flying offshore missions.

Automatic Voice Network (AUTOVON)--A major subsystem of the Defense Switched Network, which replaced the Automatic Voice Network as the principal long-haul, nonsecure voice communications network within the Defense Communications System. (Joint Pub 1-02)

- B -

Baggage, Accompanied--All baggage carried by or accompanying a passenger traveling on an aircraft. (DoD 4515.13R)

Bare Base (BB)--A base having minimum essential facilities to house, sustain, and support operations to include, if required, a stabilized runway, taxiways, and aircraft parking areas. A bare base must have a source of water that can be made potable. Other requirements to operate under bare base conditions form a necessary part of the force package deployed to the bare base. (Joint Pub 1-02)

- C -

Call Sign--Any combination of characters or pronounceable words, which identifies a communication facility, a command, an authority, an activity, or a unit; used primarily for establishing and maintaining communications. (Joint Pub 1-02)

Camouflage--The use of natural or artificial materiel on personnel, objects, or tactical positions with the aim of confusing, misleading, or evading the enemy. (Joint Pub 1-02)

Carry-on Baggage--Accompanied baggage carried aboard the aircraft by a passenger. That includes cosmetic cases, briefcases, shaving kits, or other packages to which a passenger may desire access during flight. (DoD 4515.13R)

Casualty--Any person who is lost to the organization by having been declared dead, duty status - whereabouts unknown, missing, ill, or injured. Joint Pub 1-02, for purposes of this document, the Air Force considers casualties to be persons wounded, injured, or diseased.

Casualty Category--A term used to specifically classify a casualty for reporting purposes based upon the casualty type and the casualty status. Casualty categories include killed in action, died of wounds received in action, and wounded in action. (Joint Pub 1-02)

Casualty Status--A term used to classify a casualty for reporting purposes. There are seven casualty statuses:

- Deceased.
- Duty status - whereabouts unknown.
- Missing.
- Very seriously ill or injured.
- Seriously ill or injured.
- Incapacitating illness or injury.
- Not seriously injured. (Joint Pub 1-02)

Categories of International Airlift:

- **Category A**--Transportation of passengers or cargo in less than full planeloads on a carrier's regularly scheduled commercial flight. The AMC pays the carrier through the use of AMC Form 9, Certificate of Airlift Services Performed and Accepted. Users reimburse the AMC via an AMC transportation authorization.
- **Category B**--Transportation of passengers or cargo in full planeloads on other than a carrier's regularly scheduled commercial flights. The AMC pays the carrier via contract. Users reimburse the AMC, based on the travel orders.

- **Category Y (Blocked Space)**--Round-trip transportation of passengers in blocks of 20 or more on a carrier's regularly scheduled commercial service, at round-trip Category B passenger rates. Users reimburse the AMC at the common user rate in AFR 76-11, *US Government Rate Tariffs*.
- **Category Z**--Individually ticketed passenger service the military agencies get by Government transportation request (GTR) for their own use on scheduled commercial service. The user pays directly in accordance with the carrier's filed tariff.

Certification--Process in which a qualified AECM gains aircraft and ground operations experience on an aircraft other than primary mission design series as defined by major command training standards. (MCI 10-202, Volume 9)

Chalk Commander--The commander of all troops embarked under one chalk number. (Joint Pub 1-02)

Chalk Number--The number given to a complete load and to the transporting carrier. (Joint Pub 1-02)

Chalk Troops--A load of troops defined by a particular chalk number. (Joint Pub 1-02)

Change of Operational Control (CHOP)--The date and time (Coordinated Universal Time) at which a force or unit is reassigned or attached from one commander to another where the gaining commander will exercise operational control over that force or unit. (Joint Pub 1-02)

Channel Airlift--Common-user airlift service provided on a scheduled basis between two points. (Joint Pub 1-02)

Charge Medical Technician (CMT)--A qualified AET who supervises other AETs in air crew positions on an AE mission.

Check it Out--USAF program that promotes healthful eating habits. See AFPD 40-1, *Health Promotion*, and AFI 40-104, *Nutrition Education*.

Checked Baggage--Accompanied baggage accepted and checked for a flight when a passenger is processed. It normally is stored in the aircraft in such a way that it is not available to the passenger during the flight. (DoD 4515.13R)

Chemical Agent--A chemical substance which is intended for use in military operations to kill, seriously injure, or incapacitate personnel through its physiological effects. The term excludes riot control agents, herbicides and substances generating smoke and flame. (Joint Pub 1-02)

Chemical Warfare (CW)--All aspects of military operations involving the employment of lethal and incapacitating munitions/agents and the warning and protective measures associated with such offensive operations. Since riot control agents and herbicides are not considered to be chemical warfare agents, those two items will be referred to separately or under broader term "chemical," which will be used to include all types of chemical munitions/agents collectively. The term "chemical warfare weapons" may be used when it is desired to reflect both lethal and incapacitating munitions/agents of either chemical or biological origin. (Joint Pub 1-02)

Civil Reserve Air Fleet (CRAF)--A program in which the Department of Defense uses aircraft owned by a US entity or citizen. The aircraft are allocated by Department of Transportation to augment the military airlift capability of the Department of Defense (DoD). These aircraft are allocated, in accordance with DoD requirements, to segments, according to their capabilities, such as Long-Range International (cargo and passenger), Short-Range International, Domestic, Alaskan, Aeromedical, and other segments as may be mutually agreed upon by the Department of Defense and the Department of Transportation. The Civil Reserve Air Fleet (CRAF) can be incrementally activated by the Department of Defense in three stages in response to defense-oriented situations, up to and including a declared national emergency or war, to satisfy DoD airlift requirements. When activated, CRAF aircraft are under the mission control of the Department of Defense while remaining a civil resource under the operational control of the responsible US entity or citizen. (Joint Pub 1-02)

Civil Reserve Air Fleet Stage I--This stage involves DoD use of civil air resources that air carriers will furnish to the Department of Defense to support substantially expanded peacetime military airlift requirements. The Commander, Air Mobility Command, may authorize activation of this stage and assume mission control of those airlift assets committed to CRAF Stage I. (Joint Pub 1-02)

Civil Reserve Air Fleet Stage II--This stage involves DoD use of civil air resources that the air carriers will furnish to Department of Defense in a time of defense airlift emergency. The Secretary of Defense, or designee, may authorize activation of this stage permitting the Commander, Air Mobility Command, to assume mission control of those airlift assets committed to CRAF Stage II. (Joint Pub 1-02)

Civil Reserve Air Fleet Stage III--This stage involves DoD use of civil air resources owned by a US entity or citizen that the air carriers will furnish to the Department of Defense in a time of declared national defense-oriented emergency or war, or when otherwise necessary for the national defense. The aircraft in this stage are allocated by the Secretary of Transportation to the Secretary of Defense. USTRANSCOM with the approval of the Secretary of Defense may activate this stage permitting the Commander, Air Mobility Command, to assume mission control of those airlift assets committed to CRAF Stage III. (Joint Pub 1-02)

Classified Information--Official information which has been determined to require, in the interests of national security, protection against unauthorized disclosure and which has been so designated. (Joint Pub 1-02)

Clinic--A medical treatment facility primarily intended and appropriately staffed and equipped to provide outpatient medical service for non-hospital type patients. Examination and treatment for emergency cases are types of services rendered. A clinic is also intended to perform certain nontherapeutic activities related to the health of the personnel served, such as physical examinations, immunizations, medical administration, and other preventive medical and sanitary measures necessary to support a primary military mission. A clinic will be equipped with the necessary supporting services to perform the assigned mission. A clinic may be equipped with beds (normally fewer than 25) for observation of patients awaiting transfer to a hospital and for care of cases which cannot be cared for on an outpatient status, but which do not

require hospitalization. Patients whose expected duration of illness exceeds 72 hours will not normally occupy clinic beds for periods longer than necessary to arrange transfer to a hospital. (Joint Pub 1-02)

Combat Area--A restricted area (air, land, or sea) which is established to prevent or minimize mutual interference between friendly forces engaged in combat operations. (Joint Pub 1-02)

Combat Survival--Those measures to be taken by Service personnel when involuntarily separated from friendly forces in combat, including procedures relating to individual survival, evasion, escape, and conduct after capture. (Joint Pub 1-02)

Combat Zone--1. That area required by combat forces for the conduct of operations. 2. The territory forward of the Army rear area boundary. (Joint Pub 1-02)

Combatant Command (command authority) (COCOM)--Nontransferable command authority established by title 10, Armed Forces, United States Code, section 164, exercised only by commanders of unified or specified combatant commands unless otherwise directed by the President or the Secretary of Defense. Combatant command (command authority) cannot be delegated and is the authority of a combatant commander to perform those functions of command over assigned forces involving organizing and employing commands and forces, assigning tasks, designating objectives, and giving authoritative direction over all aspects of military operations, joint training, and logistics necessary to accomplish the missions assigned to the command. Combatant command (command authority) should be exercised through the commanders of subordinate organizations. Normally this authority is exercised through subordinate joint force commanders and Service and/or functional component commanders. Combatant command (command authority) provides full authority to organize and employ commands and forces as the combatant commander considers necessary to accomplish assigned missions. Operational control is inherent in combatant command (command authority). (Joint Pub 1-02)

Command--The authority that a commander in the Military Service lawfully exercises over subordinates by virtue of rank or assignment. Command includes the authority and responsibility for effectively using available resources and for planning the employment of, organizing, directing, coordinating, and controlling military forces for the accomplishment of assigned missions. It also includes responsibility for health, welfare, morale, and discipline of assigned personnel. (Joint Pub 1-02)

Command and Control (C2)--The exercise of authority and direction by a properly designated commander over assigned and attached forces in the accomplishment of the mission. Command and control functions are performed through an arrangement of personnel, equipment, communications, facilities, and procedures employed by a commander in planning, directing, coordinating, and controlling forces and operations in the accomplishment of the mission. (Joint Pub 1-02)

Command, Control, Communications, and Computer Systems (C4 Systems)--Integrated systems of doctrine, procedures, organizational structures, personnel, equipment, facilities, and communications designed to support a commander's exercise of command and control, across the range of military operations. (Joint Pub 1-02)

Command Post (CP)--A unit's or subunit's headquarters where the commander and the staff perform their activities. In combat, a unit's or subunit's headquarters is often divided into echelons; the echelon in which the unit or submit commander is located or from which such commander operates is called a command post. (Joint Pub 1-02)

Commander in Chief (CINCH)--The acronym "CINCH" refers to the commander of a combatant command; Commander-in-Chief from Joint Pub 0-2. (Joint Pub 0-2)

Commander of Air Force Forces (COMAFFOR)--Senior Air Force commander assigned to the Joint Force.

Common User Airlift Service--The airlift service provided on a common basis for all DoD agencies and, as authorized, for other agencies of the US Government. (Joint Pub 1-02)

Communications--A method or means of conveying information of any kind from one person or place to another. (Joint Pub 1-02)

Communications Net--An organization of stations capable of direct communications on a common channel or frequency. (Joint Pub 1-02)

Communications Network--An organization of stations capable of intercommunications, but not necessarily on the same channel. (Joint Pub 1-02)

Communications Security (COMSEC)--The protection resulting from all measures designed to deny unauthorized persons information of value which might be derived from the possession and study of telecommunications, or to mislead unauthorized persons in their interpretation of the results of such possession and study. Communications security includes:

- **Cryptosecurity**--The component of communications security that results from the provision of technically sound cryptosystems and their proper use.
- **Transmission Security**--The component of communications security that results from all measures designed to protect transmissions from interception and exploitation by means other than cryptanalysis.
- **Emission Security**--The component of communications security that results from all measures taken to deny unauthorized persons information of value that might be derived from intercept and analysis of compromising emanations from crypto-equipment and telecommunications systems.

- **Physical Security**--The component of communications security that results from all physical measures necessary to safeguard classified equipment, materiel, and documents from access thereto or observation thereof by unauthorized persons. (Joint Pub 1-02)

Communications Zone (COMMZ)--Rear part of theater of operations (behind but contiguous to the combat zone) which contains the lines of communications, establishments for supply and evacuation, and other agencies required for the immediate support and maintenance of the field forces. (Joint Pub 1-02)

Competent Medical Authority--A military, civilian, or contract physician of the Department of Defense, the US Coast Guard (USCG), the US Public Health Service (USPHS), or Department of Veterans Affairs. This individual has the responsibility to provide or arrange the necessary medical care of a patient and attest to the medical need to move a patient through AE. (DoD 4515.13R)

Concept of Operations (CONOPS)--A verbal or graphic statement, in broad outline, of a commander's assumptions or intent in regard to an operation or series of operations. The concept of operations frequently is embodied in campaign plans and operation plans; in the latter case, particularly when the plans cover a series of connected operations to be carried out simultaneously or in succession. The concept is designed to give an overall picture of the operation. It is included primarily for additional clarity of purpose. (Joint Pub 1-02)

Continental United States (CONUS)--United States territory, including the adjacent territorial waters, located within North America between Canada and Mexico. (joint Pub 1-02)

Contamination--1. The deposit, absorption, or adsorption of radioactive materiel, or of biological or chemical agents on or by structures, areas, personnel, or objects. 2. Food and/or water made unfit for consumption by humans or animals because of the presence of environmental chemicals, radioactive elements, bacteria or organisms. the byproduct of the growth of bacteria or organisms, the decomposing materiel (to include the food substance itself), or waste in the food or water. (Joint Pub 1-02)

Contingency--An emergency involving military forces caused by natural disasters, terrorists, subversives, or by required military operations. Due to the uncertainty of the situation, contingencies require plans, rapid response, and special procedures to ensure the safety and readiness of personnel, installations, and equipment. (Joint Pub 1-02)

Contingency Plan--A plan for major contingencies that can reasonably be anticipated in the principal geographic subareas of the command. (Joint Pub 1-02)

Convoy--1. A number of merchant ships or naval auxiliaries, or both, usually escorted by warships and/or aircraft, or a single merchant ship or naval auxiliary under surface escort, assembled and organized for the purpose of passage together. 2. A group of vehicles organized for the purpose of control and orderly movement with or without escort protection. (Joint Pub 1-02)

Coordinated Universal Time--An atomic time scale that is the basis for broadcast time signals. (Joint Pub 1-02)

Cooked Therapeutic Inflight Meals (CTIM)--A refrigerated or frozen meal that designated medical treatment facilities prepare according to therapeutic diets as the referring physician requests (see AFI 41-303).

Corps Area--The area within a combat zone where a designated corps conducts operations.

Crew Duty Time--The total time an air or missile crew is on duty before resting. Time begins when an air or missile crew reports to a designated place of duty to begin preparation for a mission, and ends when postflight or alert crew duties are completed (for example, refueling, parking, and securing of aircraft, debriefing, equipment turn-in, or other required postflight or alert activities). (AFDD 100)

Critical Care Augmentation Transport Team (CCATT)--Physicians, nurses and respiratory therapy technicians trained to provide critical care support to AE operations. They provide team approach critical care medical support for high dependency patients during AE staging and flight.

- D -

Date-Time-Group (DTG)--The date and time, expressed in digits and zone suffix, the message was prepared for transmission. (Expressed as six digits followed by the zone suffix, first pair of digits denotes the date, second pair the hours, third pair the minutes). (Joint Pub 1-02)

Deceased--A casualty status applicable to a person who is either known to have died, determined to have died on the basis of conclusive evidence, or declared to be dead on the basis of a presumptive finding of death. The recovery of remains is not a prerequisite to determining or declaring a person deceased. (Joint Pub 1-02)

Decontamination--The process of making any person, object, or area safe by absorbing, destroying, neutralizing, making harmless, or removing, chemical or biological agents, or by removing radioactive materiel clinging to or around it. (Joint Pub 1-02)

Decontamination Station--A building or location suitably equipped and organized where personnel and materiel are cleansed of chemical, biological or radiological contaminants. (Joint Pub 1-02)

Defense Medical Regulating Information System (DMRIS)--A system that regulates patients by providing patient information (both CONUS and OCONUS) to the AECC for aeromedical evacuation scheduling. The DMRIS currently collects data that personnel used during aeromedical evacuation. Because the process of patient regulating and patient movement are so interrelated, the APES shares it with the DMRIS.

Defense Readiness Conditions--A uniform system of progressive alert postures for use between the Chairman of the Joint Chief of Staff and the commanders of unified and specified commands and for use by the Services. Defense readiness conditions are graduated to match situations of varying military severity (status of alert). Defense readiness conditions are identified by the short title DEFCON (5), (4), (3), (2), and (1), as appropriate. (Joint Pub 1-02)

Defense Switched Network (DSN)--Component of the Defense Communications System that handles Department of Defense voice, data, and video communications. (Joint Pub 1-02)

Deployment--The relocation of forces and materiel to desired areas of operations. Deployment encompasses all activities from origin or home station through destination, specifically including intra-continental United States, intertheater, and intratheater movement legs, staging, and holding areas. (Joint Pub 1-02)

Destination Medical Facility--The medical facility to which AE personnel transfer the patient.

Detachment--1. A part of a unit separated from its main organization for duty elsewhere. 2. A temporary military or naval unit formed from other units or parts of units. (Joint Pub 1-02)

Died of Wounds Received in Action (DWRIA)--A casualty category applicable to a hostile casualty, other than the victim of a terrorist activity, who dies of wounds or other injuries received in action after having reached a medical treatment facility. (Joint Pub 1-02)

Director of Mobility Forces (DIRMOBFOR)--Normally a senior officer who is familiar with the area of responsibility or joint operations area and possesses an extensive background in airlift operations. When established, the director of mobility forces serves as the designated agent of the Air Force component commander or joint force component commander, if designated, for all airlift issues in the area of responsibility or joint operations area, and for other duties as directed. The director of mobility forces exercises coordinating authority between the airlift coordination cell, the air mobility element, the Tanker Airlift Control Center, the joint movement center, and the air operations center in order to expedite the resolution of airlift problems. The director of mobility forces may be sourced from the theater's organizations, United States Transportation Command, or United States Atlantic Command. (Joint Pub 1-02)

Diversion--A rerouting of cargo or passengers to a new transshipment point or destination or on a different mode of transportation prior to arrival at ultimate destination. (Joint Pub 1-02)

Domestic Aeromedical Evacuation--That phase of aeromedical evacuation that provides airlift for patients between points within the continental United States (CONUS), and to and from offshore installations in Iceland, Puerto Rico, Cuba, Alaska, Bermuda and Panama.

Drop Zone (DZ)--A specific area upon which airborne troops, equipment, or supplies are airdropped. (Joint Pub 1-02)

- E -

Employment--The strategic, operational, or tactical use of forces. (Joint Pub 1-02)

Encrypt--To convert plain text into unintelligible forms by means of a cryptosystem. (Joint Pub 1-02)

En route Base--A station between the point of origin and destination of a mission which has the capability of supporting aircraft operating over the route. (AFDD 100)

Estimated Time of Arrival (ETA)--Estimated time of arrival of an aircraft over a given point or station.

Estimated Time of Departure (ETD)--Estimated time in which an aircraft will be airborne (depart).

ETIC--Estimated time that the aircraft is in commission.

Evacuation--1. The process of moving any person who is wounded, injured, or ill to and/or between medical treatment facilities. 2. The clearance of personnel, animals, or materiel from a given locality. 3. The controlled process of collecting, classifying, and shipping unserviceable or abandoned materiel, United States and foreign, to appropriate reclamation, maintenance, technical intelligence, or disposal facilities. (Joint Pub 1-02)

Evacuation Policy--1. Command decision indicating the length in days of the maximum period of noneffectiveness that patients may be held within the command for treatment. Patients who, in the opinion of responsible medical officers, cannot be returned to duty status within the period prescribed are evacuated by the first available means, provided the travel involved will not aggravate their disabilities. 2. A command decision concerning the movement of civilians from the proximity of military operations for security and safety reasons and involving the need to arrange for movement, reception, care, and control of such individuals. 3. Command policy concerning the evacuation of unserviceable or abandoned

materiel and including designation of channels and destinations for evacuated materiel, the establishment of controls and procedures, and the dissemination of condition standards and disposition instructions. (Joint Pub 1-02)

Evasion and Escape (E&E)--The procedures and operations whereby military personnel and other selected individuals are enabled to emerge from an enemy-held or hostile area to areas under friendly control. (Joint Pub 1-02)

Evasion and Escape Route--A course of travel, preplanned or not, that an escapee or evader uses in an attempt to depart enemy territory in order to return to friendly lines. (Joint Pub 1-02)

Exercise--A military maneuver or simulated wartime operation involving planning, preparation, and execution. It is carried out for the purpose of training and evaluation. It may be a combined, joint, or single-Service exercise, depending on participating organizations. (Joint Pub 1-02)

Explosive Ordnance--All munitions containing explosives, nuclear fission or fusion materiel's and biological and chemical agents. This includes bombs and warheads; guided and ballistic missiles; artillery, mortar, rocket, and small arms ammunition; all mines, torpedoes, and depth charges; demolition charges; pyrotechnics; clusters and dispensers; cartridge and propellant actuated devices; electro-explosive devices; clandestine and improvised explosive devices; and all similar or related items or components explosive in nature. (Joint Pub 1-02)

Explosive Ordnance Disposal (EOD)--The detection, identification, on-site evaluation, rendering safe, recovery, and final disposal of unexploded explosive ordnance. It may also include explosive ordnance which has become hazardous by damage or deterioration. (Joint Pub 1-02)

- F -

Field Exercise (FTX)--An exercise conducted in the field under simulated war conditions in which troops and armament of one side are actually present, while those of the other side may be imaginary or in outline. (Joint Pub 1-02)

Fixed Medical Treatment Facility--A medical treatment facility which is designated to operate for an extended period of time at a specific site. (Joint Pub 1-02)

Flight Clinical Coordinator (FCC)--A qualified flight nurse that is assigned or attached to an Aeromedical Evacuation Coordination Center to:

- Integrate clinical and other patient requirements into the AE airlift system.
- Advise the AEEO about inflight patient care.
- Consult with the attending and validating physicians on all patient requirements.
- Help aircrews in professional and administrative matters while performing inflight duties.

Flight Examiner (FE)--A crew member designated to administer evaluations. (MCI 10-202, Vol 9)

Flight Nurse (FN)--A Nurse Corps officer who:

- Has completed a recognized course of study in aerospace nursing.
- Appears on aeronautical orders as a flight nurse.

Flight Surgeon (FS)--A physician specially trained in aviator medical practice whose primary duty is the medical examination and medical care of aircrew. (Joint Pub 1-02)

Formatted Message Text--A message text composed of several sets ordered in a specified sequence, each set characterized by an identifier and containing information of a specified type, coded and arranged in an ordered sequence of character fields in accordance with the NATO message text formatting rules. It is designed to permit both manual and automated handling and processing. (Joint Pub 1-02)

Forward Aeromedical Evacuation--That phase of evacuation which provides airlift for patients between points within the battlefield, from the battlefield to the initial point of treatment, and to subsequent points of treatment within the combat zone. (Joint Pub 1-02)

Forward Edge of the Battle Area (FEBA)--The foremost limits of a series of areas in which ground combat units are deployed, excluding the areas in which the covering or screening forces are operating, designated to coordinate fire support, the positioning of forces, or the maneuver of units. (Joint Pub 1-02)

Forward Line of Own Troops (FLOT)--A line which indicates the most forward positions of friendly forces in any kind of military operation at a specific time. The forward line of own troops normally identifies the forward location of covering and screening forces. (Joint Pub 1-02)

Forward Operating Base (FOB)--An airfield used to support tactical operations without establishing full support facilities. The base may be used for an extended time period. Support by a main operating base will be required to provide backup support for a forward operating base. (Joint Pub 1-02)

Forward Operating Location (FOL)--A limited, supported base in close proximity to the forward edge of the battle area.

Fragmentary Order (FRAG)--An abbreviated form of an operation order, usually issued on a day-to-day basis, that eliminates the need for restating information contained in a basic operation order. It may be issued in sections. (Joint Pub 1-02)

Free Form Message Text--A message text without prescribed format arrangements. It is intended for fast drafting as well as manual handling and processing. (Joint Pub 1-02)

- G -

Global Patient Movement Requirements Center (GPMRC)--A joint activity reporting directly to the Commander-in-Chief, US Transportation Command, the Department of Defense single manager for the regulation of movement of uniformed services patients. The Global Patient Movement Requirements Center authorizes transfers to medical treatment facilities of the Military Departments or the Department of Veterans Affairs and coordinates intertheater and inside continental United States patient movement requirements with the appropriate transportation component commands or US Transportation Command. (Joint Pub 1-02)

Gross Weight (GW)--1. Weight of a vehicle, fully equipped and serviced for operation, including the weight of the fuel, lubricants, coolant, vehicle tools and spares, crew, personal equipment, and load. 2. Weight of a container or pallet including freight and binding. (Joint Pub 1-02)

- H -

Hand Baggage--Items that AE personnel and patients bring aboard the aircraft, such as briefcases and other hand-carried items.

Hazardous Cargo--Any materiel that is:

- Flammable.
- Corrosive or an oxidizing agent.
- Explosive or a compressed gas.
- Poisonous.
- Irritating.
- An etiologic (disease-producing) agent.
- Radioactive or unduly magnetic.
- Not otherwise Specific (NOS).

Note: See AFI 124-204, *Preparing Hazardous Materials for Military Air Shipment*.

Hazardous Duty Incentive Pay (HDIP)--Incentive pay for non rated personnel who must perform flying duties on a frequent and regular basis.

Hospital--A medical treatment facility capable of providing inpatient care. It is appropriately staffed and equipped to provide diagnostic and therapeutic services, as well as the necessary supporting services required to perform its assigned mission and functions. A hospital may, in addition, discharge the functions of a clinic. (Joint Pub 1-02)

Hostile--A contact positively identified as enemy. (Joint Pub 1-02)

Hostile Casualty--A person who is the victim of a terrorist activity or who becomes a casualty "in action." "In action" characterizes the casualty as having been the direct result of hostile action, sustained in combat or relating thereto, or sustained going to or returning from a combat mission provided that the occurrence was directly related to hostile action. Included are persons killed or wounded mistakenly or accidentally by friendly fire directed at a hostile force or what is thought to be a hostile force. However, not to be considered as sustained in action and not to be interpreted as hostile casualties are injuries or death due to the elements, self-inflicted wounds, combat fatigue, and except in unusual cases, wounds or death inflicted by a friendly force while the individual is in an absent-without-leave, deserter, or dropped-from-rolls status or is voluntarily absent from a place of duty. (Joint Pub 1-02)

Host Nation--A nation which receives the forces and/or supplies of allied nations and/or NATO organizations to be located on, to operate in, or to transit through its territory. (Joint Pub 1-02)

Host-Nation Support--Civil and/or military assistance rendered by a nation to foreign forces within its territory during peacetime, crisis or emergencies, or war based on agreements mutually concluded between nations. (Joint Pub 1-02)

Humanitarian and Civil Assistance--Assistance to the local populace provided by predominantly US forces in conjunction with military operations and exercises. This assistance is specifically authorized by title 10, United States Code, section 401, and funded under separate authorities. Assistance provided under these provisions is limited to:

- Medical, dental, and veterinary care provided in rural areas of the country.

- Construction of rudimentary surface transportation systems.
- Well drilling and construction of basic sanitation facilities.
- Rudimentary construction and repair of public facilities.

Assistance must fulfill unit training requirements that incidentally create humanitarian benefit to the local populace. (Joint Pub 1-02)

Humanitarian Assistance--Programs conducted to relieve or reduce the results of natural or manmade disasters or other endemic conditions such as human pain, disease, hunger, or privation that might present a serious threat to life or that can result in great damage to or loss of property. Humanitarian assistance provided by US forces is limited in scope and duration. The assistance provided is designed to supplement or complement the efforts of the host nation civil authorities or agencies that may have the primary responsibility for providing humanitarian assistance. (Joint Pub 1-02)

- I -

Immediate Message--A category of precedence reserved for messages relating to situations that gravely affect the security of national/allied forces or populace and that require immediate delivery to the addressee(s). (Joint Pub 1-02)

Individual Equipment (IE)--Referring to method of use, signifies personal clothing and equipment, for the personal use of the individual. (Joint Pub 1-02)

Injury--A term comprising such conditions as fractures, wounds, sprains, strains, dislocations, concussions, and compression's. In addition, it includes conditions resulting from extremes of temperature or prolonged exposure. Acute poisonings, except those due to contaminated food, resulting from exposure to a toxic or poisonous substance are also classed as injuries. (Joint Pub 1-02)

Instructor Aeromedical Evacuation Technician (IAET) or Instructor Flight Nurse (IFN)--Crew member trained, qualified, and certified by the squadron commander as an instructor. (MCI 10-202, Vol 9)

International Civil Aviation Organization (ICAO)--An organization responsible for regulating international air traffic. The rules developed by this body regulate all air traffic between member nations.

Intransit Aeromedical Evacuation Facility--A medical facility, on or in the vicinity of an air base, that provides limited medical care for intransit patients awaiting air transportation. This type of medical facility is provided to obtain effective utilization of transport airlift within operating schedules. It includes "remain overnight" facilities, intransit facilities at aerial ports of embarkation and debarkation, and casualty staging facilities in an overseas combat area. (Joint Pub 1-02)

In-transit Visibility (ITV)--The capability provided to a theater combatant commander to have visibility of units, personnel, and cargo while in transit through the Defense Transportation System. (Joint Pub 1-02)

Invited Medical Personnel (IMP)--US Armed Forces medical personnel traveling in a duty status with official TDY or TAD orders who may accompany aeromedical evacuation missions.

Isolated Personnel Report (ISOPREP)--A Department of Defense Form (DD 1833) that contains information designed to facilitate the identification and authentication of an evader by a recovery force. (Joint Pub 3-50.3)

- J -

Joint Airborne/Air Transportability Training (JA/ATT)--Air Force funded, Air Mobility Command managed program to exercise tactical airlift maneuvers while satisfying user combat training.

Joint Chiefs of Staff (JCS)--The staff acting as military advisors to the President of the United States. Each of the military services is represented on the Joint Chiefs of Staff.

Joint Force Air Component Commander(JFACC)--The joint force air component commander derives authority from the joint force commander who has the authority to exercise operational control, assign missions, direct coordination among subordinate commanders, redirect and organize forces to ensure unity of effort in the accomplishment of the overall mission. The joint force commander will normally designate a joint force air component commander. The joint force air component commander's responsibilities will be assigned by the joint force commander (normally these would include, but not be limited to, planning, coordination, allocation, and tasking based on the joint force commander's apportionment decision). Using the joint force commander's guidance and authority, and in coordination with other Service component commanders and other assigned or supporting commanders, the joint force air component commander will recommend to the joint force commander apportionment of air sorties to various missions or geographic areas. (Joint Pub 1-02)

Joint Medical Regulating Office (JMRO)--The office that regulates patients within a geographical area by:

- Assigning specific patients or groups of patients to specific hospitals or specialty treatment centers.

- Advising AECCs and ASTSs, along with hospitals and other agencies concerned, on patient destination, by name, group, diagnosis, or other designated identification.

Joint Movement Center (JMC)--The center established to coordinate the employment of all means of transportation (including that provided by allies or host nations) to support the concept of operations. This coordination is accomplished through establishment of transportation policies within the assigned area of responsibility, consistent with relative urgency of need, port and terminal capabilities, transportation asset availability, and priorities set by a joint force commander. (Joint Pub 1-02)

- K -

Killed in Action (KIA)--A casualty category applicable to a hostile casualty, other than the victim of a terrorist activity, who is killed outright or who dies as a result of wounds or other injuries before reaching a medical treatment facility. (Joint Pub 1-02)

- L -

Litter--A basket or frame utilized for the transport of injured patients. (Joint Pub 1-02)

Litter Patient--A patient requiring litter accommodations while in transit. (Joint Pub 1-02)

Load Message--An operational, message listing pertinent traffic and operational data that a departure station can immediately transmit electrically. Also, the form that AE personnel use during missions to transmit loads and special patient requirements to locations where patients will be exiting a plane.

Low Intensity Conflict (LIC)--Political-military confrontation between contending states or groups below conventional war and above the routine, peaceful competition among states. It frequently involves protracted struggles of competing principles and ideologies. Low intensity conflict ranges from subversion to the use of armed force. It is waged by a combination of means employing political, economic, informational, and military instruments. Low intensity conflicts are often localized, generally in the Third World, but contain regional and global security implications. (Joint Pub 1-02)

- M -

Main Operations Base (MOB)--In special operations, a base established by a joint force special operations component commander or a subordinate special operations component commander in friendly territory to provide sustained command and control, administration, and logistical support to special operations activities in designated areas. (Joint Pub 1-02)

Manifest--A document specifying in detail the passengers or items carried for a specific destination. (Joint Pub 1-02)

Mass Casualty--Any large number of casualties produced in a relatively short period of time, usually as the result of a single incident such as a military aircraft accident, hurricane, flood, earthquake, or armed attack that exceeds local logistical support capabilities. (Joint Pub 1-02)

Medical Attendant (MA)--A medical or ancillary medical person, military or civilian, who is qualified and/or authorized to participate in AE missions. (DoD 4515.13R)

Medical Crew Director (MCD)--A qualified flight nurse who supervises patient care and manages AECMs in aeromedical evacuation missions. In matters of in-flight patient care, decisions of the MCD are final unless the crew is augmented by a physician.

Medical Evacuees--Personnel who are wounded, injured, or ill and must be moved to or between medical facilities. (Joint Pub 1-02)

Medical Intelligence--That category of intelligence resulting from collection, evaluation, analysis, and interpretation of foreign medical, bio-scientific, and environmental information which is of interest to strategic planning and to military medical planning and operations for the conservation of the fighting strength of friendly forces and the formation of assessments of foreign medical capabilities in both military and civilian sectors. (Joint Pub 1-02)

Medical Logistics--Section responsible for AE:

- Materiel.
- Maintenance.
- Facility management.
- Vehicle management.

Medical Treatment Facility (MTF)--A facility established for the purpose of furnishing medical and/or dental care to eligible individuals. (Joint Pub 1-02)

Message--Any thought or idea expressed briefly in a plain or secret language and prepared in a form suitable for transmission by any means of communication. (Joint Pub 1-02)

Message (Telecommunications)--Record information expressed in plain or encrypted language and prepared in a format specified for intended transmission by a telecommunications system. (Joint Pub 1-02)

Military Convoy--A land or maritime convoy that is controlled and reported as a military unit. A Maritime convoy can consist of any combination of merchant ships, auxiliaries, or other military units. (Joint Pub 1-02)

Military Operations Other Than War (MOOTW)--Operations that encompass the use of military capabilities across the range of military operations short of war. These military actions can be applied to complement any combination of the other instruments of national power and occur before, during, and after war. (Joint Pub 1-02)

Minimize--A condition wherein normal message and telephone traffic is drastically reduced in order that messages connected with an actual or simulated emergency shall not be delayed. (Joint Pub 1-02)

Missing--A casualty status for which the United States Code provides statutory guidance concerning missing members of the Military Services. Excluded are personnel who are in an absent without leave, deserter, or dropped-from-rolls status. A person declared missing is categorized as follows:

- **Beleaguered**--The casualty is a member of an organized element that has been surrounded by a hostile force to prevent escape of its members.
- **Besieged**--The casualty is a member of an organized element that has been surrounded by a hostile force for compelling it to surrender.
- **Captured**--The casualty has been seized as the result of action of an unfriendly military or paramilitary force in a foreign country.
- **Detained**--The casualty is prevented from proceeding or is restrained in custody for alleged violation of international law or other reason claimed by the government or group under which the person is being held.
- **Interned**--The casualty is definitely known to have been taken into custody of a nonbelligerent foreign power as the result of and for reasons arising out of any armed conflict in which the Armed Forces of the United States are engaged.
- **Missing**--The casualty is not present at his or her duty location due to apparent involuntary reasons and whose location is known.
- **Missing in Action**--The casualty is a hostile casualty, other than the victim of a terrorist activity, who is not present at his or her duty location due to apparent involuntary reasons and whose location is unknown.

(Joint Pub 1-02)

Mission Clinical Coordinator (MCC)--A qualified MCD or CMT (X4N071/90), in addition to the basic crew and instructors or examiners, who serves on each ARM as the mission clinical coordinator. The MCC:

- Monitors all aspects of preflight planning.
- Flies with the crew to observe and oversee in-flight activities.
- Conducts a post-mission critique with all participants in attendance.

Mission Observer--A general or flag officer (or civilian equivalent), chaplain, or other individual invited to accompany air crews on airlift missions.

Mobile Aeromedical Staging Facility (MASF)--This facility is an air-and-ground, mobile, tented unit for temporary casualty staging. Each unit can process up to 200 patients each day, with an emergency surge capability of up to 300 patients each day for a limited duration. The MASF operates next to the taxiways of an FOB that tactical airlift use to re-supply combat ground forces.

Mobility--A quality or capability of military forces which permits them to move from place to place while retaining the ability to fulfill their primary mission. Joint Pub 1-02)

Mobilization--1. The act of assembling and organizing national resources to support national objectives in time of war or other emergency. The process by which the Armed Forces or part of them are brought to a state of readiness for war or other national emergencies. 2. The process by which the Armed Forces or part of them are brought to a state of readiness for war or other national emergency. This includes activating all or part of the Reserve Components as well as assembling and organizing personnel, supplies, and materiel. Mobilization of the Armed Forces includes but is not limited to the following categories:

- **Selective Mobilization**--Expansion of the active Armed Forces resulting from action by Congress and/or the President to mobilize Reserve Component units, individual ready reservists, and the resources needed for their support to meet the requirements of a domestic emergency that is not the result of an enemy attack.
- **Partial Mobilization**--Expansion of the active Armed Forces resulting from action by Congress (up to full mobilization) or by the President (not more than 1,000,000 for not more than 24 consecutive months) to mobilize Ready Reserve Component units, individual reservists, and the resources needed for their support to

meet the requirements of a war or other national emergency involving an external threat to the national security.

- **Full Mobilization**--Expansion of the active Armed Forces resulting from action by Congress and the President to mobilize all Reserve Component units in the existing approved force structure, all individual reservists, retired military personnel, and the resources needed for their support to meet the requirements of a war or other national emergency involving an external threat to the national security. Reserve personnel can be placed on active duty for the duration of the emergency plus six months.
- **Total Mobilization**--Expansion of the active Armed Forces resulting from action by Congress and the President to organize and/or generate additional units or personnel, beyond the existing force structure, and the resources needed for their support, to meet the total requirements of a war or other national emergency involving an external threat to the national security. (Joint Pub 1-02)

Movement Priorities:

- **Routine**--A patient who requires AE on a regularly scheduled AE mission, scheduled military airlift channel mission, or commercially procured airlift service.
- **Priority**--A patient who requires AE sooner than the next scheduled channel AE mission or sooner than can be accommodated using scheduled military airlift channel mission, or commercially procured airlift service.
- **Urgent**--AE required as soon as possible to save life, limb, or eyesight. Immediate action shall be taken to obtain AE or other suitable transportation to meet patient requirements. Terminally ill or psychiatric patients are not considered urgent patients.(DoD 4515.13R)

- N -

National Command Authorities (NCA)--The President and the Secretary of Defense or their duly deputized alternates or successors. (Joint Pub 1-02)

National Disaster Medical System (NDMS)--A program in which authorities set aside civilian hospital beds in specific geographical locations to:

- Provide care for casualties from a natural disaster.
- Handle an overflow of patients due to armed conflict.

National Emergency--A condition declared by the President or the Congress by virtue of powers previously vested in them that authorize certain emergency actions to be undertaken in the national interest. Action to be taken may include partial, full, or total mobilization of national resources. (Joint Pub 1-02)

Nation Assistance--Civil and/or military assistance rendered to a nation by foreign forces within that nation's territory during peacetime, crises or emergencies, or war based on agreements mutually concluded between nations. Nation assistance programs include, but are not limited to, security assistance, foreign internal defense, other US Code Title 10 (DoD) programs, and activities performed on a reimbursable basis by Federal agencies or international organizations. (Joint Pub 1-02)

Need to Know--A criterion used in security procedures which requires the custodians of classified information to establish, prior to disclosure, that the intended recipient must have access to the information to perform his or her official duties. (Joint Pub 1-02)

Net (Communications)--An organization of stations capable of direct communications on a common channel or frequency. (Joint Pub 1-02)

Net Control Station (NCS)--A communications station designated to control traffic and enforce circuit discipline within a given net. (Joint Pub 1-02)

Noncombatant Evacuation Operations (NEO)--Operations conducted to relocate threatened noncombatants from locations in a foreign country. These operations normally involve United States citizens whose lives are in danger, and may also include selected foreign national. (Joint Pub 1-02).

Normal Operations--Generally and collectively, the broad functions which a combatant commander undertakes when assigned responsibility for a given geographic or functional area. Except as otherwise qualified in certain unified command plan paragraphs which relate to particular commands, "normal Operations" of a combatant commander include:

- planning for and execution of operations throughout the range of military operations.
- planning and conduct of cold war activities.
- planning for and administration of military assistance.
- maintaining the relationships and exercising the directive or coordinating authority prescribed in Joint Pub 0-2, Admin. Pub 1.1, and Joint Pub 4-01.

(Joint Pub 1-02)

Not Seriously Injured--The casualty status of a person whose injury may or may not require hospitalization; medical authority does not classify as very seriously injured, seriously injured, or incapacitating illness or injury; and the person can communicate with the next of kin. (Joint Pub 1-02)

Nurse of the Day (NOD)--A nurse who may plan for and provide clinical information to an originating crew.

- O -

Official Information--Information which is owned by, produced for or by, or is subject to the control of the United States Government. (Joint Pub 1-02)

Operation--A military action or the carrying out of a strategic, tactical, service, training, or administrative military mission; the process of carrying on combat, including movement, supply, attack, defense and maneuvers needed to gain the objectives of any battle or campaign. (Joint Pub 1-02)

Operational Control (OPCON)--Transferable command authority that may be exercised by commanders at any echelon at or below the level of combatant command. Operational control is inherent in combatant command (command authority). Operational control may be delegated and is the authority to perform those functions of command over subordinate forces involving organizing and employing commands and forces, assigning tasks, designating objectives, and giving authoritative direction necessary to accomplish the mission. Operational control includes authoritative direction over all aspects of military operations and joint training necessary to accomplish missions assigned to the command. Operational control should be exercised through the commanders of subordinate organizations. Normally this authority is exercised through subordinate joint force commanders and Service and/or functional component commanders. Operational control normally provides full authority to organize commands and forces and to employ those forces as the commander in operational control considers necessary to accomplish assigned missions. Operational control does not, in and of itself, include authoritative direction for logistics or matters of administration, discipline, internal organization, or unit training. (Joint Pub 1-02)

Operation Plan (OPLAN) -- Any plan, except for the Single Integrated Operation Plan, for the conduct of military operations. Plans are prepared by combatant commanders in response to requirements established by the Chairman of the Joint Chiefs of Staff and by commanders of subordinate commands in response to requirements tasked by the establishing unified commander. Operations plans are prepared in either a complete format (OPLAN) or as a concept plan (CONPLAN). The CONPLAN can be published with or without a time-phased force and deployment data (TPFDD) file.

- **OPLAN**--An operation plan for the conduct of joint operations that can be used as a basis for development of an operation order (OPORD). An OPLAN identifies the forces and supplies required to execute the CINC's Strategic Concept and a movement schedule of these resources to the theater of operations. The forces and supplies are TPFDD files. OPLANs will include all phases of the tasked operation. The plan is prepared with the appropriate annexes, appendixes, and TPFDD files as described in the Joint Operation Planning and Execution System manuals containing planning policies, procedures, and formats.
- **CONPLAN**--An operation plan in an abbreviated format that would require considerable expansion or alteration to convert it into an OPLAN or OPORD. A CONPLAN contains the CINC's Strategic Concept and those annexes and appendixes deemed necessary by the combatant commander to complete planning. Generally, detailed support requirements are not calculated and TPFDD files are not prepared.
- **CONPLAN With TPFDD**--A CONPLAN with TPFDD is the same as a CONPLAN except that it requires more detailed planning for phased deployment of forces. (Joint Pub 1-02)

Opportune Lift--That portion of lift capability available for use after planned requirements have been met. (Joint Pub 1-02)

Order--A communication, written, oral, or by signal, which conveys instructions from a superior to a subordinate. In a broad sense, the terms "order" and "command" are synonymous. However, an order implies discretion as to the details of execution whereas a command does not. (Joint Pub 1-02)

Ordnance--Explosives, chemicals, pyrotechnics, and similar stores, e.g. bombs, guns, and ammunition, flares, smoke, napalm. (Joint Pub 1-02)

Originating Medical Facility--A medical facility that initially transfers a patient to another medical facility. (Joint Pub 1-02)

- P -

Password--A secret word or distinctive sound used to reply to a challenge. (Joint Pub 1-02)

Patient--A sick, injured, wounded, or other person requiring medical/dental care or treatment. (Joint Pub 1-02)

Pay Patient--See "Revenue-Reimbursable Patient."

Personnel Increment Number (PIN)--A seven-character, alphanumeric field that uniquely describes a non-unit-related personnel entry (line) in a Joint Operation Planning and Execution System time-phased force and deployment date. (Joint Pub 1-02)

Petroleum, Oils, and Lubricants (POL)--A broad term which includes all petroleum and associated products used by the Armed Forces. (Joint Pub 1-02)

Phonetic Alphabet--A list of standard words used to identify letters in a message transmitted by radio or telephone. The following are the authorized words, listed in order, for each letter in the alphabet: ALPHA, BRAVO, CHARLIE, DELTA, ECHO, FOXTROT, GOLF, HOTEL, INDIA, JULIETT, KILO, LIMA, MIKE, NOVEMBER, OSCAR, PAPA, QUEBEC, ROMEO, SIERRA, TANGO, UNIFORM, VICTOR, WHISKEY, X-RAY, YANKEE, and ZULU. (Joint Pub 1-02)

Physical Security--That part of security concerned with physical measures designed to safeguard personnel; to prevent unauthorized access to equipment, installations, materiel, and documents; and to safeguard them against espionage, sabotage, damage, and theft. (Joint Pub 1-02)

Port of Debarkation (POD)--The geographic point at which cargo or personnel are discharged. May be a seaport or aerial port of debarkation. For unit requirements, it may or may not coincide with the destination. (Joint Pub 1-02)

Port of Embarkation (POE)--The geographic point in a routing scheme from which cargo or personnel depart. May be a seaport or aerial port from which personnel and equipment flow to port of debarkation. For unit and nonunit requirements, it may or may not coincide with the origin. (Joint Pub 1-02)

Precedence (Communications)--A designation assigned to a message by the originator to indicate to communications personnel the relative order of handling and to the addressee the order in which the message is to be noted. (Joint Pub 1-02)

Presidential Selected Reserve Callup Authority--Provision of a public law (US Code title 10 [DoD], section 12304) that provides the President a means to activate, without a declaration of national emergency, not more than 200,000 members of the Selected Reserve for not more than 270 days to meet the support requirements of any operational mission. Members called under this provision may not be used for disaster relief or to suppress insurrection. This authority has particular utility when used in circumstances in which the escalatory national or international signals of partial or full mobilization would be undesirable. Forces available under this authority can offer a tailored, limited-scope, deterrent, or operational response, or may be used as precursor to any subsequent mobilization. (Joint Pub 1-02)

Preventive Maintenance (PM)--The care and servicing by personnel for the purpose of maintaining equipment and facilities in satisfactory operating condition by providing for systematic inspection, detection, and correction of incipient failures either before they occur or before they develop into major defects. (Joint Pub 1-02)

Priority Message--A category of precedence reserved for messages that require expeditious action by the addressee(s) and/or furnish essential information for the conduct of operations in progress when routine precedence will not suffice. (Joint Pub 1-02)

Proword--A word or phrase limited to radio telephone procedure used to facilitate communication by conveying information in a condensed standard form. (Joint Pub 1-02)

- Q -

- R -

Readiness Planning--Operational planning required for peacetime operations. Its objective is the maintenance of high states of readiness and the deterrence of potential enemies. It includes planning activities that influence day-to-day operations and the peacetime posture of forces. As such, its focus is on general capabilities and readiness rather than the specifics of a particular crisis, either actual or potential. The assignment of geographic responsibilities to combatant commanders, establishment of readiness standards and levels, development of peacetime deployment patterns, coordination of reconnaissance and surveillance assets and capabilities, and planning of joint exercises are examples of readiness planning. No formal joint planning system exists for readiness planning such as exists for contingency and execution planning. (Joint Pub 1-02)

Rear Area--For any particular command, the area extending forward from its rear boundary to the rear of the area of responsibility of the next lower level of command. This area is provided primarily for the performance of combat service support functions. (Joint Pub 1-02)

Redeployment--The transfer of a unit, an individual, or supplies deployed in one area to another area, or to another location within the area, or to the zone of interior for the purpose of further employment. (Joint Pub 1-02)

Remain Overnight (RON)--A stop during an AE flight at which patients remain overnight in a facility awaiting further transportation to a destination hospital.

Revenue Reimbursable Patient--Any patient, not entitled to transportation or medical care at Government expense, such as State Department, or certain DoD civilian employees, for whom the USAF and AMC receives reimbursement for aeromedical evacuation services (DoD 4515.13R)

Routine Message--A category of precedence to be used for all types of messages that justify transmission by rapid means unless of sufficient urgency to require a higher precedence. (Joint Pub 1-02)

Rules of Engagement--Directives issued by competent military authority which delineate the circumstances and limitations under which United States forces will initiate and/or continue combat engagement with other forces encountered. (Joint Pub 1-02)

Rush Baggage--Baggage that becomes separated from a passenger during AE travel.

- S -

Safe Area--A designated area in hostile territory that offers the evader or escapee a reasonable chance of avoiding capture and of surviving until he/she can be evacuated. (Joint Pub 1-02)

Search and Rescue (SAR)--The use of aircraft, surface craft, submarines, specialized rescue teams and equipment to search for and rescue personnel in distress on land or at sea. (Joint Pub 1-02)

Secretarial Designee--A person not normally a DoD healthcare beneficiary, who is designated a Military Department healthcare beneficiary by the Secretary of Defense or the Secretary of the Military Department concerned. AE shall not be provided unless specifically authorized by the Secretary and the designation document states that the sponsoring Secretary shall reimburse the AMC for AE costs. (DoD 4515.13R)

Security--1. Measures taken by a military unit, an activity or installation to protect itself against all acts designed to, or which may, impair its effectiveness. 2. A condition that results from the establishment and maintenance of protective measures that ensure a state of inviolability from hostile acts or influences. 3. With respect to classified matter, it is the condition that prevents unauthorized persons from having access to official information that is safeguarded in the interests of national security. (Joint Pub 1-02)

Security Classification--A category to which national security information and materiel is assigned to denote the degree of damage that unauthorized disclosure would cause to national defense or foreign relations of the United States and to denote the degree of protection required. There are three such categories:

- **Top Secret**--National security information or materiel which requires the highest degree of protection and the unauthorized disclosure of which could reasonably be expected to cause exceptionally grave damage to the national security. Examples of "exceptionally grave damage" include armed hostilities against the United States or its allies; disruption of foreign relations vitally affecting the national security; the compromise of vital national defense plans or complex cryptologic and communications intelligence systems; the revelation of sensitive intelligence operations; and the disclosure of scientific or technological developments vital to national security.
- **Secret**--National security information or materiel which requires a substantial degree of protection and the unauthorized disclosure of which could reasonably be expected to cause serious damage to the national security. Examples of "serious damage" include disruption of foreign relations significantly affecting the national security; significant impairment of a program or policy directly related to the national security; revelation of significant military plans or intelligence operations; and compromise of significant scientific or technological developments relating to national security.
- **Confidential**--National security information or materiel which requires protection and the unauthorized disclosure of which could reasonably be expected to cause damage to the national security. (Joint Pub 1-02)

Senior Lodger--A CRAF carrier that has contractually committed itself to support civil aircraft and crews for the AMC as they transit between theaters after the Secretary of Defense has activated Stage III of the CRAF.

Seriously Ill or Injured (SI)--The casualty status of a person whose illness or injury is classified by medical authority to be of such severity that there is cause for immediate concern, but there is not imminent danger to life. (Joint Pub 1-02)

Seriously Wounded--A stretcher case. (Joint Pub 1-02)

Shortfall--The lack of forces, equipment, personnel, materiel, or capability reflected as the difference between the resources identified as a plan requirement and those apportioned to a combatant commander for planning, that would adversely affect the command's ability to accomplish its mission. (Joint Pub 1-02)

Show of Force--An operation, designed to demonstrate United States resolve, which involves increased visibility of United States deployed forces in an attempt to defuse a specific situation that, if allowed to continue, may be detrimental to United States interests or national objectives. (Joint Pub 1-02)

Signal--As applied to electronics, any transmitted electrical impulse. (Joint Pub 1-02)

Situation Report (SITREP)--A report giving the situation in the area of a reporting unit or formation. (Joint Pub 1-02)

Slightly Wounded--A casualty that is a sitting or a walking case. (Joint Pub 1-02)

Space Available Travel--The specific program of travel authorized by Chapter 6 of DoD 4515.13R, allowing authorized passengers to occupy DoD aircraft seats, at no cost to the traveler, that are surplus after all space-required passengers have been accommodated. (DoD 4515.13R)

Space Block--A reservation of space that AE personnel requests and the controlling agency confirms to ensure that space is available for moving patients on a particular mission.

Space Required Patients--Any patient that AE personnel authorize to travel aboard aeromedical aircraft.

Space Required Traffic--"Mission essential traffic," as identified in DoD 4515.13R. (DoD 4515.13R)

Special Air Mission (SAM)--Missions operated by aircraft assigned in support of the special airlift requirements of the President, Vice President, Cabinet, members of Congress, and other high-ranking American and foreign dignitaries. (HQ AMC Air Mobility Master Plan).

Special Assignment Airlift Mission (SAAM)--Airlift requirements, including Chairman, Joint Chiefs of Staff (CJCS)-directed or coordinated exercises, that require special consideration because of the number of passengers involved, weight or size of cargo, urgency of movement, sensitivity, or other valid factors that preclude the use of channel airlift.

Stabilized Patient--A patient who is stabilized within the limitations of the originating MTFs capability and can withstand a bed-to-bed evacuation without sustaining complications requiring invasive treatment or intervention beyond the scope of general supportive care during evacuation. As a minimum, a patent airway must be established, fractures splinted, hemorrhage controlled, and shock treated prior to movement.

Status-of-Forces Agreement--An agreement which defines the legal position of a visiting military force deployed in the territory of a friendly state. Agreements delineating the status of visiting military forces may be bilateral or multilateral. Provisions pertaining to the status of visiting forces may be set forth in a separate agreement, or they may form a part of a more comprehensive agreement. These provisions describe how the authorities of a visiting force may control members of that force and the amenability of the force or its members to the local law or to the authority of local officials. To the extent that agreements delineate matters affecting the relations between a military force and civilian authorities and population, they may be considered as civil affairs agreements. (Joint Pub 1-02)

Stowed Baggage--All baggage accompanying a patient or attendants aboard an aeromedical evacuation aircraft and stored in the aircraft baggage compartment.

Strategic Aeromedical Evacuation--The phase of evacuation of patients out of the theater of operations to a main support area. (AFDD 100)

Strategic Airlift--Airlift that operates between the continental United States and a theater or between theaters. (Joint Pub 4-01.1)

Structured Message Text--A message text composed of paragraphs ordered in a specified sequence, each paragraph characterized by an identifier and containing information in free form. It is designed to facilitate manual handling and processing. (Joint Pub 1-02)

- T -

Table of Allowances (TA)--An equipment allowance document which prescribes basic allowances of organizational equipment, and provides the control to develop, revise, or change equipment authorization inventory data. (Joint Pub 1-02)

Tactical Aeromedical Evacuation--That phase of evacuation which provides airlift for patients from the combat zone to points outside the combat zone, and between points within the communications zone. (Joint Pub 1-02)

Tactical Control (TACON)--Command authority over assigned or attached forces or commands, or military capability or forces made available for tasking, that is limited to the detailed and, usually, local direction and control movements or maneuvers necessary to accomplish missions or tasks assigned. Tactical control is inherent in operational control. Tactical control may be delegated to, and exercised at any level at or below the level of combatant command. (Joint Pub 1-02)

Tanker Airlift Control Center (TACC/XOAMM)--The Air Mobility Command direct reporting unit responsible for tasking and controlling operational missions for all activities involving forces supporting USTRANSCOM's global air mobility mission. The TACC is comprised of the following functions: current operations, command and control, logistics operations, aerial port operations, aeromedical evacuation, flight planning, diplomatic clearances, weather, and intelligence. (Joint Pub 1-02)

Tanker Airlift Control Element (TALCE)--A mobile command and control organization deployed to support strategic and theater air mobility operations at fixed, en route, and deployed locations where air mobility operational support is nonexistent or insufficient. The Tanker Airlift Control Element provides on-site management of air mobility airfield operations to include command and control, communications, aerial port services, maintenance, security, transportation, weather, intelligence, and other support functions, as necessary. The Tanker Airlift Control Element is composed of mission support elements from various units and deploys in support of peacetime, contingency, and emergency relief operations on both a planned and "no notice" basis. (Joint Pub 1-02)

Terrorism--The calculated use of violence or threat of violence to inculcate fear; intended to coerce or to intimidate governments or societies in the pursuit of goals that are generally political, religious, or ideological. (Joint Pub 1-02)

Terrorist--An individual who uses violence, terror, and intimidation to achieve a result. (Joint Pub 1-02)

Terrorist Threat Conditions--A Chairman of the Joint Chiefs of Staff-approved program standardizing the Military Services' identification of and recommended responses to terrorist threats against U.S. personnel and facilities. This

program facilitates inter-Service coordination and support for antiterrorism activities. Also called **THREATCONS**. There are four **THREATCONS** above normal:

- **THREATCON ALPHA**--This condition applies when there is a general threat of possible terrorist activity against personnel and facilities, the nature and extent of which are unpredictable, and circumstances do not justify full implementation of THREATCON BRAVO measures. However, it may be necessary to implement certain measures from higher THREATCONS resulting from intelligence received or as a deterrent. The measures in this THREATCON must be capable of being maintained indefinitely.
- **THREATCON BRAVO**--This condition applies when an increased and more predictable threat of terrorist activity exists. The measures in this THREATCON must be capable of being maintained for weeks without causing undue hardship, affecting operational capability, and aggravating relations with local authorities.
- **THREATCON CHARLIE**--This condition applies when an incident occurs or intelligence is received indicating some form of terrorist action against personnel and facilities is imminent. Implementation of measures in this THREATCON for more than a short period probably will create hardship and affect the peacetime activities of the unit and its personnel.
- **THREATCON DELTA**--This condition applies in the immediate area where a terrorist attack has occurred or when intelligence has been received that terrorist action against a specific location or person is likely. Normally, this THREATCON is declared as a localized condition. (Joint Pub 1-02)

Theater--The geographical area outside the continental United States for which a commander of a combatant command has been assigned responsibility. (Joint Pub 1-02)

Tactical Aeromedical Evacuation--That phase of evacuation which provides airlift for patients from the combat zone to points outside the combat zone, and between points within the communications zone. (Joint Pub 1-02)

Theater Aeromedical Evacuation System (TAES)--The deployed elements of tactical aeromedical evacuation units that provide theater aeromedical evacuation during an exercise or contingency operations. A TAES includes:

- At least one AE command and control element.
- An aeromedical evacuation coordination center.
- One mobile aeromedical staging facility.
- One liaison team.
- The required number of aeromedical evacuation crews.

Theater of Operations--A subarea within a theater of war defined by the geographic combatant commander required to conduct or support specific combat operations. Different theaters of operations within the same theater of war will normally be geographically separate and focused on different enemy forces. Theaters of operations are usually of significant size, allowing for operations over extended periods of time. (Joint Pub 1-02)

Theater Patient Movement Requirements Center (TPMRC)--A unified theater office designated to regulate patients within the theater assigned by monitoring theater casualty reception hospital bed availability and assigning specific patients or groups of patients to specific MTFs. The TPMRC normally interfaces and controls the regulation of patients from E3 to E4 medical facilities and coordinates regulation of patients to CONUS from E4 facilities. Subject to the specific theater concept of operations, the TPMRC does not normally regulate patients between other echelons; this regulation is routinely a Component Service responsibility. The medical regulating and coordinating functions now performed by the JMRO and AECC, could be integrated into a TPMRC at the discretion of the theater commander with advice from the DIRAEFOR and theater surgeon to provide "one stop shopping" for regulation and movement. When established, the TPMRC will acquire theater lift and theater beds and transform them into "lift-beds". TPMRCs will also be able to select intertheater "lift-beds" from resources identified by the GPMRC. The TPMRC provides medical regulating services, limited ITV, and aeromedical evacuation planning within a theater. TPMRCs may generate theater AE operational plans, request and coordinate intratheater AE airlift, and coordinate AE element and MTF activities to ensure seamless patient movement and ITV. In the absence of a TPMRC function, the JMRO will regulate patients and the AECC will coordinate airlift for movement. Each theater will develop their own concept of operations for the TPMRC. The Unified/Joint Forces Commander may establish regional TPMRCs as required to support contingency/OOTW patient movement operations. The establishment of a TPMRC in a mature or immature theater does not eliminate the requirement for an AECC. The AECC is still responsible for overall AE system management and providing a command and control structure for the theater AE forces. Changes in the business rules of the regulating function and the airlift coordination process are required to achieve an agency that provides a "one stop" activity for customers to identify patient movement requirements. These changes need to be developed and published prior to mission execution to allow all elements involved the opportunity to adapt to the new procedures. The originating MTF will submit a patient movement request (PMR) in accordance with prescribed procedures using available communications support system. When the TPMRC receives a bed request from an MTF, they reply with a site designation and an aircraft itinerary. This may be accomplished by sorting patient bed requirements by planned site destinations and forwarding the total number of patient movement requirements per destination MTF to the transportation

agent (JMCC, ALCC/AECC) to match bed requirements to airlift availability. Airlift planners would review the request and respond back to the TPMRC through established command and communications channels with a proposed airlift plan that supports patient movement requirements. The TPMRC communicates patient evacuation requirements to service components who will execute the AE mission. The ALCC may still utilize the AECC personnel for mission planning. The AECC will assign AE missions to specific AE elements.

Time of Receipt (TOR)--The time at which a receiving station completes reception of a message. (Joint Pub 1-02)

Timed-phased Force and Deployment Data Refinement (TPFDD)--For both global and regional operation plan development, the process consists of several discrete phases time-phased force and deployment date (TPFDD) that may be conducted sequentially or concurrently, in whole or in part. These phases are Concept, Plan Development, and Review. The Plan Development Phase consists of several subphases: Forces, Logistics, and Transportation, with shortfall identification associated with each phase. The Plan Development phases are collectively referred to as TPFDD refinement. The normal TPFDD refinement process consists of sequentially refining forces, logistics (non-unit-related personnel and sustainment), and transportation data to develop a TPFDD file that supports a feasible and adequate overlapping of several refinement phases. The decision is made by the supported commander, unless otherwise directed by the Chairman of the Joint Chiefs of Staff. For global planning, refinement conferences are conducted by the Joint Staff in conjunction with US Transportation Command. TPFDD refinements conducted in coordination with supported and supporting commanders, Services, the Joint Staff, and other supporting agencies. Commander in Chief, US Transportation Command, will normally host refinement conferences at the request of the Joint Staff or the supported commander. (Joint Pub 1-02)

Times--(C-, D-, M-days end at 2400 hours Universal Time [zulu time] and are assumed to be 24 hours long for planning.) The Chairman of the Joint Chiefs of Staff normally coordinates the proposed date with the commanders of the appropriate unified and specified commands, as well as any recommended changes to C-day. L-hour will be established per plan, crisis, or theater of operations and will apply to both air and surface movements. Normally, L-hour will be established to allow C-day to be a 24-hour day.

- **C-day**--The unnamed day on which a deployment operation commences or is to commence. The deployment may be movement of troops, cargo, weapon systems, or a combination of these elements using any or all types of transport. The letter "C" will be the only one used to denote the above. The highest command or headquarters responsible for coordinating the planning will specify the exact meaning of C-day within the aforementioned definition. The command or headquarters directly responsible for the execution of the operation, if other than the one coordinating the planning, will do so in light of the meaning specified by the highest command or headquarters coordinating the planning.
- **D-day**--The unnamed day on which a particular operation commences or is to commence.
- **F-hour**--The effective time of announcement by the Secretary of Defense to the Military Departments of a decision to mobilize Reserve units.
- **H-hour**--The specific hour on D-day at which a particular operation commences.
- **L-hour**--The specific hour on C-day at which a deployment operation commences or is to commence.
- **M-day**--The term used to designate the unnamed day on which full mobilization commences or is due to commence.
- **N-day**--The unnamed day an active duty unit is notified for deployment or redeployment.
- **R-day**--Redeployment day. The day on which redeployment of major combat, combat support, and combat service support forces begins in an operation.
- **S-day**--The day the President authorizes Selected Reserve callup (not more than 200,000).
- **T-day**--The effective day coincident with Presidential declaration of National Emergency and authorization of partial mobilization (not more than 1,000,000 personnel exclusive of the 200,000 callup).
- **W-day**--Declared by the National Command Authorities, W-day is associated with an adversary decision to prepare for war (unambiguous strategic warning). (Joint Pub 1-02)

Triage--The evaluation and classification of casualties for purposes of treatment and evacuation. It consists of the immediate sorting of patients according to type and seriousness of injury, and likelihood of survival, and the establishment of priority for treatment and evacuation to assure medical care of the greatest benefit to the largest number. (Joint Pub 1-02)

- U -

Unaccompanied Baggage--Baggage that does not accompany a patient or attendant as either stowed baggage or hand luggage on an aeromedical evacuation aircraft.

Unclassified Matter--Official matter which does not require the application of security safeguards, but the disclosure of which may be subject to control for other reasons. (Joint Pub 1-02)

Unexploded Explosive Ordnance--Explosive ordnance which has been primed, fused, armed or otherwise prepared for action, and which has been fired, dropped, launched, projected or placed in such a manner as to constitute a hazard to operations, installations, personnel or materiel and remains unexploded either by malfunction or design or for any other cause. (Joint Pub 1-02)

Unified Command--A command with a broad continuing mission under a single commander and composed of significant assigned components of two or more Military Departments, and which is established and so designated by the President, through the Secretary of Defense with the advice and assistance of the Chairman of the Joint Chiefs of Staff. (Joint Pub 1-02)

Unit Identification Code--A six-character, alphanumeric code that uniquely identifies each Active, Reserve, and National Guard unit of the Armed Forces. (Joint Pub 1-02)

Unit Line Number (ULN)--A seven-character, alphanumeric field that uniquely describes a unit entry (line) in a Joint Operation Planning and Execution System time-phased force and deployment data. (Joint Pub 1-02)

Unit Training Assembly (UTA)--An authorized and scheduled period of unit inactive duty training of a prescribed length of time. (Joint Pub 1-02)

Unit Type Code (UTC)--A five-character alphanumeric code that uniquely identifies each type unit of the Armed Forces. (Joint Pub 1-02).

Universal Time (UT)--A measure of time that conforms, within a close approximation, to the mean diurnal rotation of the Earth and serves as the basis of civil timekeeping. Formerly called Greenwich Mean Time (GMT). (Joint Pub 1-02)

Unregulated Patient--A patient without a designated destination medical treatment facility.

Unscheduled AE Mission--A mission that moves AE patients who cannot move on a scheduled AE mission. There are several categories of unscheduled AE missions:

- **Urgent or Priority Launch**--Missions that are launched specifically to move an urgent or priority patient.
- **AE SAAM**--An AMC mission that does not follow an established AMC channel route to support an AE requirement. The TACC:
 - Identifies these missions with special assignment airlift mission (SAAM) numbers (which contain four numbers after "SAAM," for example, "SAAM1011") in addition to the AMC 12-character mission identifier.
 - Assigns the number to that portion of a mission where the aircraft deviates from its original itinerary. **NOTE:** This may include the entire itinerary.
- **AE Opportune**--A scheduled cargo or passenger mission that the AE system uses to move a patient or patients without changing the mission's planned operations. Rather than paying for the total mission, the AE system buys space on these missions. An AE opportune mission could even be someone else's SAAM mission that is going to the patient's desired destination.

US Armed Forces Patients--See DoD Regulation 4515.13-R, *Air Transportation Eligibility*.

US Central Command (USCENTCOM)--A unified command, designated to deploy and operate in the southwest Asia area of responsibility.

US Non-Armed Forces Patients--Personnel classified as an inpatient or outpatient by competent medical authority and falling into one of the following four categories:

- An active duty or eligible retired member of the Armed Forces.
- A dependent of an active duty member of the Armed Forces, of a member of the Armed Forces deceased while on active duty, or of a retired or deceased retired member of the Armed Forces who is authorized medical care under the Service regulation.
- A U.S. citizen civilian employee of the Armed Forces and their lawful dependents when stationed outside the CONUS.
- A foreign national, and his or her legal dependents, who is a career employee of the Department of Defense and is working in a country of which he or she is not a citizen. (DoDR 4515.13)

- V -

Vehicle Distance--The clearance between vehicles in a column which is measured from the rear of one vehicle to the front of the following vehicle. (Joint Pub 1-02)

Very Seriously Ill or Injured (VSI)--The casualty status of a person whose illness or injury is classified by medical authority to be of such severity that life is imminently endangered. (Joint Pub 1-02)

- W -

Walking Patient--A patient not requiring a litter while in transit. (Joint Pub 1-02)

War--A state of undeclared or declared armed hostile action characterized by the sustained use of armed force between nations or organized groups within a nation involving regular and irregular forces in a series of connected military operations or campaigns to achieve vital national objectives. (Joint Pub 5-00.1)

War Reserve Materiel (WRM)--Materiel required in addition to primary operating stocks and mobility equipment to attain the operational objectives in the scenarios authorized for sustainability planning in the Defense Planning Guidance. (AFDD 100).

Wounded in Action--A casualty category applicable to a hostile casualty, other than the victim of a terrorist activity, who has incurred an injury due to an external agent or cause. The term encompasses all kinds of wounds and other injuries incurred in action, whether there is a piercing of the body, as in a penetration or perforated wound, or none, as in the contused wound. These include fractures, burns, blast concussions, all effects of biological and chemical warfare agents, and the effects of an exposure to ionizing radiation or any other destructive weapon or agent. The hostile casualty's status may be very seriously ill or injured, seriously ill or injured, incapacitating illness or injury, or not seriously injured. (Joint Pub 1-02)

- X -

- Y -

- Z -

ZULU Time (Z)--See Universal Time. (Joint Pub 1-02)

Section B--Abbreviations and Acronyms

AC	Alternating Current
ACC	Air Combat Command
ACLS	Advanced Cardiac Life Support
ADCOM	Administrative Control
ADP	Air Drop/Paratroops
ADVON	Advanced Echelon
AE	Aeromedical Evacuation
AECC	Aeromedical Evacuation Coordination Center
AECE	Aeromedical Evacuation Control Element
AECM	Aeromedical Evacuation Crew Member
AECMC	Aeromedical Evacuation Crew Management Cell
AECOT	Aeromedical Evacuation Contingency Operations Training
AEEB	Aeromedical Evacuation Executive Board
AEGH	Aeromedical Evacuation Group Headquarters
AEFS	Aeromedical Evacuation Flight Surgeon
AEIT	Aeromedical Evacuation Liaison Team
AEMS	Aeromedical evacuation mission support
AEOO	Aeromedical Evacuation Operations Officer
AEOT	Aeromedical Evacuation Operations Team
AES	Aeromedical Evacuation Squadron
AESC	Aeromedical Evacuation Support Cell
AESG	Aeromedical Evacuation Steering Group
AESH	Aeromedical Evacuation Squadron Headquarters
AET	Aeromedical Evacuation Technician
AETC	Air Education and Training Command

AEU	Aeromedical Evacuation Unit
AF	Air Force
AFCC	Air Force Component Commander
AFDD	Air Force Doctrine Document
AFDIR	Air Force Directory
AFFOR	Air Force forces (component of a unified or specified command)
AFH	Air Force Handbook
AFI	Air Force Instruction
AFJH	Air Force Joint Handbook
AFJI	Air Force Joint Instruction
AFJMAN	Air Force Joint Manual
AFM	Air Force Manual
AFMAN	Air Force Manual
AFMC	Air Force Materiel Command
AFMD	Air Force Manpower Determinant
AFORMS	Air Force Operations Resource Management System
AFOSH	Air Force Occupational Safety and Health
AFPAM	Air Force Pamphlet
AFPD	Air Force Policy Directive
AFR	Air Force Regulation
AFRES	Air Force Reserve
AFSATCOM	Air Force Satellite Communications
AFSC	Air Force Specialty Code
AFSOC	Air Force Special Operations Command
AFTO	Air Force Technical Order
AGE	Aerospace Ground Equipment
AGW	Allowable Gross Weight
ALCC	Airlift Coordination Cell
ALCE	Airlift Control Element
AMC	Air Mobility Command
AMCR	Air Mobility Command Regulation
AMCSP	Air Mobility Command Special Pamphlet
AME	Air Mobility Element
AMOS	Air Mobility Operations Squadron
ANG	Air National Guard
ANGUS	Air National Guard of the United States
ANGRC	Air National Guard Readiness Center
AOC	Air Operations Center
AOG	Air Operations Group
AOR	Area of Responsibility
APES	Automated Patient Evacuation System
APOD	Aerial Port of Debarkation
APOE	Aerial Port of Embarkation
APS	Aerial Port Squadron
APT	Air Passenger Terminal
ARC	Air Reserve Component
ARM	Aeromedical Readiness Missions
ART	Air Reserve Technician
ASMRO	Armed Services Medical Regulating Office
ASTS	Aeromedical Staging Squadron
AT	Air Technician
ATA	Actual Time of Arrival
ATC	Air Transportable Clinic
ATD	Actual Time of Departure
ATG/L	Air Transportable Galley/Lavatory
ATH	Air Transportable Hospital

ATOC	Air Terminal Operations Center
ATSO	Ability to Survive and operate
AUTOVON	Automatic Voice Network
AWOL	Absent without leave
B/ALTS	Basic/Advanced Trauma Life Support
BB	Bare Base
BCLS	Basic Cardiac Life Support
BDA	Bomb or Battle Damage Assessment
BOS	Base Operating Support
BP	Blood Pressure
BX	Box
C2	Command and Control
C4	Command, Control, Communications, and Computers
C4I	Command, Control, Communications, Computers, and Intelligence
CAP	Crisis Action Planning
CASF	Contingency Aeromedical Staging Facility
CAT	Crisis Action Team
CB	Chemical - Biological
CCATT	Critical Care Augmentation Transport Team
C-day	Unnamed day on which a deployment operation begins
CENTCOM	U.S. Central Command
CFETP	Career field education and training plan
CHOP	Change of Operational Control
CINC	Commander in Chief
CJCS	Chairman-Joint Chiefs of Staff
CMRT	Continuing medical readiness training
CMT	Charge Medical Technician
CNC	Central nervous system
COB	Collocated Operating Base
COCOM	Combatant Command
COMAFFOR	Commander, Air Force Forces
COMAMC	Commander, Air Mobility Command
COMMZ	Communications Zone
COMPUSEC	Computer Security
COMSEC	Communications Security
CONOPS	Concept of Operations
CONUS	Continental United States
C/P	Cargo/Passengers
CP	Command Post
CRAF	Civil Reserve Air Fleet
CTIM	Cooked Therapeutic Inflight Meals
D-day	Unnamed day on which operations commence or are scheduled to commence
DB	Duffel Bag
DBMS	Director, Base Medical Services
DC	Direct Current
DCS	Decompression Sickness
DD	Department of Defense (for forms)
DDN	Defense Data Network
DEFCON	Defense Readiness Condition
DEPMEDS	Deployable Medical System
DIRAEFOR	Director, Aeromedical Evacuation Forces
DIRMOBFOR	Director of Mobility Forces
DMRIS	Defense Medical Regulating Information System
DNBI	Disease and Nonbattle Injury
DNR	Do Not Resuscitate
DO	Deputy Commander of Operations

DOC	Designated Operational Capability
DoD	Department of Defense
DOT	Director of Operations-Training
DPSC	Defense Personnel Support Center
DSN	Defense Switched Network
DSVT	Digital Subscriber Voice Terminal
DTG	Date Time Group
DV	Distinguished Visitor
DZ	Drop Zone
EAP	Emergency Action Procedure
ECAS	Electrical Cable Assembly Set
ECP	Entry Control Point
E&E	Evasion and Escape
EEFI	Essential Elements of Friendly Information
EFTO	Encrypted for Transmission Only
ENT	Ear, Nose and Throat
EOD	Explosive Ordnance Disposal
EPW	Enemy Prisoner of War
ERD	Evaluation reference date
ERO	Engines running onload/offload
ETA	Estimated Time of Arrival
ETD	Estimated Time of Departure
ETIC	Estimated Time in Commission
EUCOM	European Command
EZ	Extraction Zone
F-hour	Effective time of announcement by the Secretary of Defense to the Military Departments of a decision to mobilize Reserve units
FAA	Federal Aviation Administration
FASF	Fixed Aeromedical Staging Facility
FCC	Flight Clinical Coordinator
FCIF	Flight Crew Information File
FDA	Food and Drug Administration
FE	Flight Examiner
FEMA	Federal Emergency Management Agency
FI	Flight Instructor
FL	Foot Locker
FLOT	Forward Line of Own Troops
FMO	Frequency Management Office
FN	Flight Nurse
FOB	Forward Operating Base
FOL	Forward Operating Location
FRAG	Fragmentation Code
FS	Flight Surgeon
FT	Flight Training
FTU	Flying training unit
FTX	Field Training Exercise
GAETT	Global Aeromedical Evacuation Training Team
GI	Gastrointestinal
GI/GU	Gastrointestinal/Genitourinary
GMT	Greenwich Mean Time
GPMRC	Global Patient Movement Requirements Center
GR	Grade
GT	Ground training
H-hour	Specific time an operation or exercise begins; seaborne assault; landing hour
HA	Humanitarian Assistance
HAZMAT	Hazardous Materiel

HB	Hand Bag
HBDFA	Hospital Basic Daily Food Allowance
HDIP	Hazardous Duty Incentive Pay
HF	High Frequency
HLZ	Helicopter Landing Zone
HQ	Headquarters
HSS	Health Service Support
HUB	Hangup Bag
IAET	Instructor Aeromedical Evacuation Technician
ICAO	International Civil Aviation Organization
IFF	Identification, friend or foe
IFN	Instructor Flight Nurse
IIP	Increased intracranial pressure
IMP	Invited Medical Personnel
INMARSAT	International Maritime Satellite
INTEL	Intelligence
I/O	Input/Output
ISOPREP	Isolated Personnel Report
ISSA	Inter-Service Support Agreement
ITV	Intransit Visibility
IV	Intravenous
J-1	Manpower and Personnel Directorate of a joint staff
J-2	Intelligence Directorate of a joint staff
J-3	Operations Directorate of a joint staff
J-4	Logistics Directorate of a joint staff
J-5	Plans Directorate of a joint staff
J-6	Command, Control, Communications, and Computer Systems Directorate of a joint staff
JA/ATT	Joint Airborne Control Center/Command Post
JAPO	Joint Area Petroleum Office
JCAHO	Joint Commission on Accreditation of Healthcare Organizations
JCAT	Joint Crisis Action Team
JCCP	Joint Casualty Collection Point
JCS	Joint Chiefs of Staff
JFACC	Joint Force Air Component Commander
JMCC	Joint Movement Control Center
JMRO	Joint Medical Regulating Office
JOPES	Joint Operation planning and Execution System
JRTC	Joint Readiness Training Center
JTF	Joint Task Force
JULLS	Joint Universal Lessons Learned System
KIA	Killed in Action
L-hour	Specific hour on C-day at which a deployment operation commences or is to commence
LIC	Low Intensity Conflict
L/M	Liters per minute
LMR	Land Mobile Radio
LUC	Left upper quadrant
M-day	Mobilization day; unnamed day on which mobilization of forces begins
MA	Medical Attendant
MACR	Military Airlift Command Regulation
MAJCOM	Major Command
MASF	Mobile Aeromedical Staging Facility
MCC	Mission Clinical Coordinator
MCD	Medical Crew Director
MCI	Multi-command Instruction
MCOCR	Major Command of Collateral Responsibility

MCOPR	Major Command of Primary Responsibility
MCR	Multi-command Regulation
MDS	Mission Design Series
M&E	Monitoring and Evaluation
MEFPAK	Manpower and Equipment Force Packaging System
MEGP	Mission Essential Ground Personnel
MERC	Medical Equipment Repair Center
mg	Milligrams
mm	Millimeters
MMO	Medical Materiel Office
MIA	Missing in Action
MISCAP	Mission Capability
MOA	Memorandum of Agreement
MOB	Main Operating Base
MOG	Maximum (aircraft) on the Ground
MOOTW	Military Operations Other Than War
MOP	Memorandum of Policy
MOU	Memorandum of Understanding
MPA	Military Personnel Authorization
MPU	Mobility Processing Unit
MRC	Major Regional Contingency
MRE	Meal, Ready to Eat
MSC	Medical Service Corps
MSL	Manpower Source Listing
MTF	Medical Treatment Facility
N/A	Not applicable
NAF	Numbered Air Force
NATO	North Atlantic Treaty Organization
NB	No Bag
NBC	Nuclear, Biological, Chemical
NCA	National Command Authorities
NCO	Non Commissioned Officer
NCOIC	Non Commissioned Officer in Charge
NCS	Net Control Station
NDMS	National Disaster Medical System
NEO	Noncombatant Evacuation Operations
NGB	National Guard Bureau
NMA	Nonmedical Attendant
NOAA	National Oceanographic and Atmospheric Association
NOD	Nurse on Duty
NOFORN	Not Releasable to Foreign Nationals
NOK	Next of Kin
NOS	Not Otherwise Specific
NPO	Nothing by mouth
NVG	Night Vision Goggles
OB	Order of Battle
OCONUS	Outside Continental United States
OCR	Office of Collateral Responsibility
OG	Operations Group
OIC	Officer in Charge
O&M	Operation and Maintenance
OOTW	Operations Other than War
OPCON	Operational Control
OPLAN	Operation Plan
OPORD	Operation Order
OPR	Office of Primary Responsibility

OR	Other
OSA	Operational Support Airlift
OPSEC	Operations Security
OSHA	Occupational Safety and Health Agency
P	Passenger
P	Proficient
PACAF	Pacific Air Forces
PACOM	Pacific Command
paCO ₂	Pressure of arterial carbon dioxide
paO ₂	Pressure of arterial oxygen
PCO ₂	Pressure of carbon dioxide
PSC	Permanent Change of Station
PERSCO	Personnel Support for Contingency Operations
PKO	Peacekeeping Operations
POA	Power of Attorney
POC	Point of Contact
POD	Point of Debarkation
POE	Point of Embarkation
POL	Petroleum, oils, and lubricants
POV	Privately Owned Vehicle
POW	Prisoner of War
PO ₂	Pressure of oxygen
PT LOX	Patient Liquid Oxygen
PTT	Push-to-talk
PZ	Pickup Zone
Q	Qualified
Q-	Qualified with weakness
QA/I	Quality Assessment and Improvement
QI/RM	Quality Improvement and Risk Management
RBC	Red blood cells
RMO	Resource management office
RON	Remain overnight
RTD	Return to duty
RZ	Recovery Zone
SAAM	Special Assignment Airlift Mission
SAFE	Selected area for evasion
SAM	Self administered medications
SAM	Special Airlift Mission
SATCOM	Satellite Communications
SC	Suitcase
SG	Surgeon General
SGLI	Serviceman's Group Life Insurance
SI	Seriously ill
SITREP	Situation Report
SME	Squadron Medical Element
SOC	Standards of Care
SORTS	Status of Resources and Training System
SOUTHCOM	Southern Command
SSN	Social Security Number
Stan/Eval	Standardization/Evaluation
STU-III	Secure Telephone Unit III
SWA	Southwest Asia
T	Training
TA	Table of allowances
TACC	Tanker Airlift Control Center
TACON	Tactical Control

TACS	Theater Air Control System
TAES	Theater Aeromedical Evacuation System
TALCE	Tanker Airlift Control Element
TBM	Tactical Ballistic Missile
TDY	Temporary duty
TDRL	Temporary Duty Retired List
T.O.	Technical Order
TPFDD	Time-Phased Force and Deployment Data
TPMRC	Theater Patient Movement Requirements Center
TPR	Temperature, pulse, and respiration
TQT	Task Qualification Training
U	Unqualified
UCMJ	Uniform Code of Military Justice
UHF	Ultra-High Frequency
UMD	Unit Manpower Document
URI	Upper respiratory infection
USACOM	United States Atlantic Command
USAF	United States Air Force
USAFE	United States Air Forces in Europe
USAFR	United States Air Force Reserve
USAFSAM	United States Air Force School of Aerospace Medicine
USCINCPAC	Commander in Chief, United States Pacific Command
USEUCOM	United States European Command
USFJ	United States Forces Japan
USFK	United States Forces Korea
USTRANSCOM	United States Transportation Command
UT	Universal Time
UTA	Unit Training Assembly
UTC	Unit Type Code
UXO	Unexploded Ordnance
VSI	Very seriously ill
WARMED PS	Wartime Medical Planning System
WIA	Wounded in Action
WBC	White blood cells
WRM	War Reserve Materiel
Z	Zulu time

Section C--Patient Classification

Code	Classification
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Psychiatric Category-1:

1A	Severe psychiatric litter patients. Psychiatric patients requiring the use of restraining apparatus, sedation, and close supervision at all times.
1B	Psychiatric litter patients of intermediate severity. Patients requiring tranquilizing medication or sedation, not normally requiring the use of restraining apparatus. NOTE: Keep restraining apparatus available for use.
1C	Psychiatric walking patients of moderate severity. Cooperative and reliable under observation.

Litter Category-2:

2A	Immobile litter patients, non psychiatric, who cannot move about on their own under any circumstances.
2B	Mobile litter patients, non psychiatric, who can move about on own their own under emergency circumstances.

Ambulatory Category-3:

- 3A Ambulatory patients, non psychiatric and non substance abuse, going for treatment or evaluation.
- 3B Recovered patents, returning to home station.
- 3C Ambulatory, drug or alcohol (substance) abuse, going for treatment.

Infant Category-4:

- 4A Infant, under 3 years of age, occupying an aircraft seat going for treatment.
- 4B Infant, under 3 years of age, occupying an aircraft seat returning from treatment
- 4C Infant requiring an incubator, litter type.
- 4D Infant under 3 years of age, litter type.
- 4E Outpatient under 3 years of age, ambulatory.

Outpatient Category-5:

- 5A Outpatient ambulatory patient, non psychiatric and non substance abuse going for treatment.
- 5B Outpatient ambulatory, drug or alcohol (substance) abuse, going for treatment.
- 5C Psychiatric outpatient going for treatment or evaluation.
- 5D Outpatient on litter for comfort going for treatment.
- 5E Returning outpatient on litter for comfort.
- 5F Returning outpatient.

Attendant Category-6:

6A Medical Attendant
 6B Non medical Attendant

Section D--Grade Codes - Officer

<u>RANK</u>	<u>AIR FORCE</u>	<u>ARMY</u>	<u>MARINE</u>	<u>GRADE</u>	<u>CODE</u>
General	Gen	GEN	Gen	O-10	O10
Lieutenant General	Lt Gen	LTG	LTtGen	O-09	O09
Major General	Maj Gen	MG	MajGen	O-08	O08
Brigadier General	Brig Gen	BG	BGen	O-07	O07
Colonel	Col	COL	Col	O-06	O06
Lieutenant Colonel	Lt Col	LTC	LtCol	O-05	O05
Major	Maj	MAJ	Maj	O-04	O04
Captain	Capt	CPT	Capt	O-03	O03
First Lieutenant	1st Lt	1LT	1stLt	O-02	O02
Second Lieutenant	2d Lt	2LT	2ndLt	O-01	O01
Chief Warrant Officer W-5		CW5	CWO5	W-05	W05
Master Warrant Officer MW-4		CW4		W-04	W04
Chief Warrant Officer W-4		CW4	CWO4	W-04	W04
Chief Warrant Officer W-3		CW3	CWO3	W-03	W03
Chief Warrant Officer W-2		CW2	CWO2	W-02	W02
Chief Warrant Officer W-1		CW1		W-01	W01

<u>RANK</u>	<u>NAVY/COAST GUARD</u>	<u>GRADE</u>	<u>CODE</u>
Admiral	ADM	O-10	O10
Vice Admiral	VADM	O-09	O09
Rear Admiral	RADM (Upper Half)	O-08	O08
Rear Admirial	RADM (Lower Half)	O-07	O07
Captain	CAPT	O-06	O06
Commander	CDR	O-05	O05
Lieutenant Commander	LCDR	O-04	O04
Lieutenant	LT	O-03	O03
Lieutenant, Junior Grade	LTJG	O-02	O02
Ensign	ENS	O-01	O01
Chief Warrant Officer W-4	CWO4	W-04	W04
Chief Warrant Officer W-3	CWO3	W-03	W03
Chief Warrant Officer W-2	CWO2	W-02	W02

Section E--Grade Codes - Enlisted

<u>RANK</u>	<u>AIR FORCE</u>	<u>GRADE</u>	<u>CODE</u>
Chief Master Sergeant of the Air Force	CMSAF	E-9	E09
Chief Master Sergeant	CMSgt	E-9	E09
Senior Master Sergeant	SMSgt	E-8	E08
Master Sergeant	MSgt	E-7	E07
Technical Sergeant	TSgt	E-6	E06
Staff Sergeant	SSgt	E-5	E05
Senior Airman	SrA	E-4	E04
Airman First Class	A1C	E-3	E03
Airman	Amn	E-2	E02
Airman Basic	AB	E-1	E01

<u>RANK</u>	<u>ARMY</u>	<u>GRADE</u>	<u>CODE</u>
Sergeant Major of the Air Army	SMA	E-9	E09
Command Sergeant Major	CSM	E-9	E09
Sergeant Major	SGM	E-9	E09
First Sergeant	1SG	E-8	E08
Master Sergeant	MSG	E-8	E08
Sergeant First Class	SFC	E-7	E07
Staff Sergeant	SSGT	E-6	E06
Sergeant	SGT	E-5	E05
Corporal	CPL	E-4	E04
Specialist	SPC	E-4	E04
Private First Class	PFC	E-3	E03
Private	PV2	E-2	E02
Private	PV1	E-1	E01

<u>RANK</u>	<u>MARINE</u>	<u>GRADE</u>	<u>CODE</u>
Sergeant Major of the Marine Corps	SGTMAJ of MC	E-9	E09
Sergeant Major	SGTMAJ	E-9	E09
Master Gunnery Sergeant	MGYSGT	E-9	E09
First Sergeant	FSGT	E-8	E08
Master Sergeant	MSGT	E-8	E08
Gunnery Sergeany	GYSGT	E-7	E07
Staff Sergeant	SSGT	E-6	E06
Sergeant	SGT	E-5	E05
Corporal	CPL	E-4	E04
Lance Corporal	LCPL	E-3	E03
Private First Class	PFC	E-2	E02
Private	PVT	E-1	E01

<u>RANK</u>	<u>NAVY/ COAST GUARD</u>	<u>GRADE</u>	<u>CODE</u>
Master Chief Petty Officer of the Navy	MCPON	E-9	E09
Master Chief Petty Officer	MCPO	E-9	E09
Senior Chief Petty Officer	SCPO	E-8	E08
Chief Petty Officer	CPO	E-7	E07
Petty Officer First Class	PO1	E-6	E06
Petty Officer Second Class	PO2	E-5	E05
Petty Officer Third Class	PO3	E-4	E04
Seaman	SN	E-3	E03
Seaman Apprentice	SA	E-2	E02
Seaman Recruit	SR	E-1	E01

Section F--Grade Codes - Other

<u>TITLE</u>	<u>CODE</u>
OSI	A00
Aviation Cadet	C00
ROTC Cadet	C00
Contract Surgeon	C00
Dependent	N00

Other	N00
DoD Civilian Employee	N00

Section G--Category Codes

<u>CATEGORY</u>	<u>USAF</u>	<u>USA</u>	<u>USN</u>	<u>USMC</u>	<u>USCG</u>	<u>USPHS</u>	<u>NOAA</u>
<u>ACTIVE DUTY</u>							
Active Duty (Including ARC)	F11	A11	N11	M11	C11	P11*	O11*
Active Duty for training (Including ARC)	F12	A12	N12	M12	C12	P12*	O12*
Cadet/Midshipman	F13	A13	N13	M13	C13	P13*	O13*
ROTC Cadets	F81	A81	N81				
Inactive Duty for Training	F21	A21	N21	M21	C21	P21*	
Former Service Member for Maternity Care	X61						
<u>RETIRED STATUS</u>							
By Length of Service	F31	A31	N31	M31	C31	P31*	O31*
Retired - Medically	F32	A32	N32	M32	C32	P32*	O32*
Temporary Duty Retired List (TDRL)	F33	A33	N33	M33	C33	P33*	O33*
<u>DEPENDENTS</u>							
Active Duty Dependents	F41	A41	N41	M41	C41	P41*	O41*
Dependents Moving in a PCS Status*	F46	A46	N46	M46	C46	P46	O46
Dependents of Retired	F42	A42	N42	M42	C42	P42*	O42*
Dependents of Deceased	F43	A43	N43	M43	C43	P43*	O43*
Dependents of Deceased Retired	F44	A44	N44	M44	C44	P44*	O44*
Former Spouse	X52						
<u>OTHER MILITARY/DEPENDENTS</u>							
Active Duty/NATO*	F51	A51	N51	M51			
Dependents of Active Duty/NATO*	F52	A52	N52	M52			
Non-NATO Active Duty*	X53						
Dependents of Non-NATO Active Duty*	X54						
<u>FOREIGN NATIONALS</u>							
Foreign Nationals in US for Medical Care*	X57						
Foreign nationals US Employee*	X58						
Foreign Nationals - Other*	X59						
<u>FEDERAL AGENCIES</u>							
Department of State Employee*	H72						
Dependent, Dept of State Employee*	H73						
Employee Other Federal Agencies*	H74						
Dependents, Empl Other Fed Agencies*	H75						

NOTE 1: * Indicates a Revenue Reimbursable Patient

MILITARY SECRETARY DESIGNEES

(NOTE: Reimbursable when in non-support of Armed Forces Patient)

Secretary of Defense Designee	D90
Secretary of Army Designee	A90
Secretary of Navy Designee	N90
Secretary of Air Force Designee	F90

OTHERS

Prisoners of War	Q99
US Citizen-Dependent of Civilian Employee Stationed Overseas	X62
US Citizen - State Department* (Includes Peace Corps)	X63
US Citizen - Civilian Employee of DoD Stationed Overseas	X64
US Citizen - CONUS - Civil Service Employee Sick or Injured While TDY*	X69
VA Beneficiary*	X71
American Indian and Trust Territory of the Pacific Islands*	X76
American Merchant Marine*	X77
US Citizen - Civilian Emergency*	X92
All Other Patient Categories*	X99

NOTE 1: * Indicates a Revenue Reimbursable Patient

NOTE 2: Family attendants numbering over one (1) as nonmedical attendants accompanying the patient or sponsor when the sponsor is in a PCS status are listed on AF Form 3830, Patient Manifest, with the applicable category code listed above. If the sponsor is the patient, list the spouse as the nonmedical attendant if he or she is traveling with the sponsor. If a dependent is the patient, list the sponsor as the nonmedical attendant if he or she is traveling with the family.